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MONTANA FIVE-YEAR PLAN FOR FAMILY SUPPORT AND PRESERVATION

October, 1995

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The Montana Five-Year Integrated Plan

for Family Support and Preservation

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INTRODUCTION

The family remains the cornerstone upon which societies are built and upon which they rely for strength, values, productivity and livelihood. Unfortunately, the human services system and other societal institutions and forces in the political, economic and social sectors often behave in ways that appear to be antithetical to fostering and supporting this cornerstone. This is the case when out-of-home placement rather than family support, preservation and empowerment is the service of first resort in family and child welfare practice.

The current Montana administration, the state Legislature and the Department (to become part of the Montana Department of Public Health and Human Services (DPHHS) on July 1, 1995) remain committed to reversing these patterns and to developing a system of community-based and family-based services that will treat families as entire units, within the context of their environment, for the purpose of preserving and strengthening them. To articulate the intent to fundamentally change the service system, in 1993 the Department adopted a new mission statement --

"Protect Children and Adults
by Supporting Family and Community Strengths"

The Department will continue to be guided by its mission through:

1) services to strengthen and preserve families;
2) services to prevent abuse and neglect;
3) protective services for children and adults;
4) child day care and other family support services;
5) coordination with youth correction services (being transferred to an new department effective July 1, 1995); and
6) therapeutic services.

Some of these services are provided directly by the Department and others in cooperation with other private and public entities.

This Montana Five Year Integrated Plan for Family Preservation and Support Services (FP/FS) builds on several key planning efforts already initiated within the Montana Department of Family Services: the state Family Services Advisory Council Strategic Plan, developed in 1994, the Family Preservation and Family Support first year plan developed during state fiscal year 1994, and the Partnership to Strengthen Families Project plan developed in early 1994.

This integrated plan was created by a collaborating body of service providers, community representatives, political leaders and consumers, and in consultation with federal Health and Human Services Region VIII staff over the last two years. It is the fruit of the efforts of hundreds of people statewide and many hours of meetings in numerous communities. In that sense, it truly is a Montana plan.

The FP/FS Plan is rooted in a vision that "Montana will be an environment where all families thrive." The plan addresses the needs of overburdened families and at-risk children by supporting:

- a balanced system inclusive of the needs of at-risk children and parents that is culturally sensitive, family-centered, comprehensive, flexible and community-based;
- methods and tools which respect the strengths and dignity of families and communities;
- the family to emerge from patterns of abuse and neglect or exploitation of a family member;
- strengthening prevention and family support services;
- a commitment to assure that all child clients have a life-long family connection;
- a full and integrated continuum of services (from child abuse/neglect prevention through intensive out-of-home treatment);
- quality assurance and evaluation; and
- inclusion of Indian representatives in all department and interagency planning efforts for increasing the system of community-based, family-centered services.

The vision for this plan links and complements the mission of Montana Children and Family Programs.

The mission statement embodies the philosophy of this evolution and is grounded firmly in the principles of family support and preservation. The Montana Family Policy Act also prescribes that the principles of family preservation and support be employed to guide the actions of state government. This statute requires that all state agencies and programs in Montana be evaluated by whether they strengthen or hurt Montana's families -- an important legislative policy decision highlighting the importance of family-strengthening and family-supporting efforts by Montana governmental programs.

The planning process that resulted in this document recognizes that family support must be applied not only to "preventive" actions and services, but to families displaying needs at every level. Family support and preservation becomes the umbrella under which all family service efforts develop.

This plan encourages an end to premature negative labeling of families and emphasizes strengthening and supporting families in their capacity to nurture their children in healthy and safe environments and to resume operating to their fullest capacity as productive social units. This plan addresses the needs of families within the holistic course of human development and is based on the following set of guiding principles to be employed when this plan is implemented at every level of service delivery.

1. Mission: The mission of the Department, "Protect Children and Adults by Supporting Family and Community Strengths," will be followed in developing both the five year state plan, and the five regional plans.

2. Acceptance of all family models: The plan reflects the broadest definition of "family," i.e., "two or more persons connected through legal or affectional ties and who have a commitment to continue the connection."

3. Partnership: Both the planning process and the services identified provide avenues for participation by all Montanans. This is a team effort involving the state, communities and families.

4. Enhancement: Programs and services acknowledge that every parent and family member has skills and talents that can be developed to improve family functioning.

5. Comprehensive: A wide variety of needed coordinated services are offered to meet the multiple, interrelated needs of families.

6. Holistic: Services are designed to acknowledge all aspects of the individual, family and community, e.g., social, emotional, psychological, financial, physical, spiritual and environmental.

7. Permanency: Services will promote lifelong connections with a family for all Montana children.

8. Accountability: The services provided under the plan will promote accountability on all levels -- individual, family, community and state.

9. Honoring Customs and Traditions: This plan and implementation will honor the traditions and customs that promote healing and support family strengths.

10. Trust: The plan and implementation will emphasize the basic components of trust - consistency, predictability and dependability.

11. Cooperation: Bridges will be built through the planning and implementation processes that will balance competing interests and reduce tension that exist in contemporary American life.

12. Disintegration-Reintegration: The planning members recognized that any system reform will include both "danger" and "opportunity" when elements are changed, reformed or eliminated, and structures are "re-formed" in more significant ways.

Sections described in this plan are not exclusive. The overlap between and among sections is indicative of the interface between and among services represented in this document. This five-year plan is restricted to services that are currently provided to families with minor children.

Significance of The Upcoming State Reorganization

During the development of this plan, the Montana State Legislature enacted a major reorganization effort to consolidate human service agencies into the new Department of Public Health and Human Services, beginning July 1, 1995. The Department of Social and Rehabilitation Services and portions

of the Departments of Family Services, Health and Environmental Sciences, and Corrections and Human Services are being combined into one agency.

The participants in the FP/FS planning process cannot predict the impact that reorganization will have on this plan and its goals, objectives and action plans. The plan includes service recommendations generally for the next two years in anticipation of potential consolidation of services within the new agency structure. Every effort will be made by the current Department of Family Services' staff to ensure a smooth transition of our efforts into the planning strategies of the new agency.

ASSURANCES

The Department provides the following assurances:

1. Assurance that the agency administering Title IV-B, subpart 2, is the same agency administering Title IV-B, subpart 1.

2. Assurance that it will conduct an annual review of progress toward accomplishing goals and objectives, and, if necessary, will revise goals and objectives in its yearly report and update.

3. Assurance that it will conduct a final review of progress toward accomplishing goals, in consultation with appropriate entities, that will result in the preparation of a final report which will be submitted to ADF and made available to the public, and will include a statement of goals intended to be accomplished by the end of the next five-year plan cycle.

4. Assurance that it will adhere to a 10 percent limitation on administrative costs associated with implementing the Plan, and that the remaining expenditures are earmarked for programs of family preservation services and community-based family support services.

5. Assurance that it will expend significant portions of its allocation for both family preservation and community-based family support services which are specified in the Plan.

6. Assurance that it will make available to the Secretary and the public the description of family preservation and community-based family support services which will be provided under the plan in the subsequent fiscal year; the populations the programs will serve; and, the geographic areas in the State in which the services will be available.

7. Assurance that it will make the description of services available to the public, in the case of the first fiscal year under the Plan, at the time the State submits the initial Plan, and for succeeding fiscal years by the end of the third quarter of the immediately preceding fiscal year.

8. Assurance that it will administer the Plan in accordance with methods determined by the Secretary to be proper and efficient.

9. Assurance that Federal funds provided to the State will not be used to supplant Federal or non-Federal funds for existing services and activities which promote the purposes of this program.

10. Assurance that it will furnish reports to the Secretary in a format and containing information the Secretary may require, for the purpose of demonstrating State compliance with the supplantation provision.

11. Assurance that it will furnish reports containing information and participate in evaluations the Secretary may require.

12. Assurance that it will not use other Federal funds to meet the 25 percent match.

13. Assurance that it will not expend Title IV-B, subpart 2, funds for any fiscal year after the end of the immediately succeeding fiscal year.

14. Assurance that it will comply with the Multi-Ethnic Placement Act.

15. Assurance that it will comply with the Indian Child Welfare Act.

Effective Date and State Officials Signature

I hereby certify that the State/Indian Tribe complies with the requirements of law listed above in the Assurances.

Dated: June 28, 1995

Certified by: _____

Title: Director

Agency: MT. DEPT. OF FAMILY SERVICES

Dated: _____

Reviewed by: _____
ACF Regional Representative

SECTION I: THE PLANNING PROCESS

Preparation of this plan was grounded in broad involvement and consultation with a wide range of public and private agencies and individuals. It included community-based organizations, parents, service providers and state agency people, representatives from Montana Indian tribes, and Health and Human Services Region VIII staff. The plan also integrated the planning efforts of the Department's major family support initiative, the Partnership to Strengthen Families ("Partnership Project") which began in late 1993.

The "Partnership Project" is the Department's first major child abuse prevention and child support initiative and is funded through state general funds. The annual project budget is $1.3 million. The "Partnership Project" programs represent a significant effort to enhance and expand family support efforts to those families at risk of child abuse and neglect. The "Partnership Project" complements the programs funded by the state Children's Trust Fund and has allowed for more intensive, family driven, community-based, culturally competent programming.

Family support/family preservation funds represent another critical piece of the prevention/early intervention continuum by allowing an expansion of efforts to those geographic areas not served by the "Partnership Project". No FP/FS funds will supplant "Partnership" funds; on the contrary, FP/FS funds will enhance building a continuum of family support and preservation initiatives across Montana.

Phase I: Planning Prior To Montana's Implementation of the FP/FS Act

Partnership to Strengthen Families -- In early 1994, the Department initiated the Partnership to Strengthen Families Project ("Partnership Project") in conjunction with local communities selected in each of the Department's five planning regions. This partnership is designed to assist the Department in accomplishing its new mission and to invest resources in child abuse and neglect prevention programming. The project goals are to strengthen families, decrease the instances of child abuse and neglect in the target population and avoid unnecessary out-of-home placements. The Project supports an array of community-based services for at-risk families. The target populations served by this project are:

A. Those families at risk of abuse and neglect who have not yet been referred to the Department and whose children are prenatal to three years old; and

B. Those families who have recently been referred to the Department but whose children are not at risk for removal.

By focusing limited resources on programs designed to help families most at risk for abuse and neglect the Department anticipates a greater impact with its prevention efforts. The "Partnership Project" programs are based on "best practice" methods. They allow the Department, "Partnership Projects", community members and families to operate from a common framework of understanding as programs are developed and implemented to reduce child abuse and neglect and strengthen families. Common "best practice" characteristics are:

- comprehensive
- voluntary

- intensive
- accessible
- respectful
- based on family strengths
- use research-based programming
- flexible
- culturally sensitive
- responsive
- community based

By mid-1994, twenty communities were initially chosen throughout Montana to participate in this effort. The communities included:

Region 1: Glasgow, Miles City, Glendive and Sidney
Region 2: Hill County, Blaine County, Ft. Belknap Reservation and Rocky Boy Reservation
Region 3: Yellowstone County
Region 4: Bozeman, Silver Bow County, Lewis and Clark County, Granite County, Powell County, Deer Lodge County, Madison/Beaverhead Counties
Region 5: Missoula County, Libby/Troy, Eureka, Flathead County

Communities conducted an extensive local planning process to assess available resources and identify needs. This process included discussions with local agencies, families, interested community members and the Department's staff. Each community designed its individual set of comprehensive services based on their strategic planning efforts. Communities then submitted an application for funds that was reviewed by the Department's local Family Services Advisory Councils (the regional advisory committee statutorily authorized to insure that Department's services are relevant to community needs and norms) and by the "Partnership Project" State Guidance Team.

In FY 94-95, $1 million was provided to seventeen communities to initiate "Partnership" services. Three communities received planning grants. See Appendix 1 for a detailed description of sites, staffing, services and budgets for each of the "Partnership" sites and a map indicating "Partnership" site locations. See Appendix 2 for a list of local participants in the "Partnership Project" planning process.

This effort preceded the FP/FS Act but clearly mirrored many of the same goals in the FP/FS legislation. The "Partnership Project" provided a head start on much of the planning around family support that became incorporated into the FP/FS plan. The FP/FS funds have been utilized to augment the "Partnership" efforts in those geographic areas not served by "Partnership" programs.

Phase II: Planning Following the Implementation of the FP/FS Act

An initial strategy session for the FP/FS Act was held on April 15, 1994, to review the mandate of the Act and to begin a strategic planning process. Sixty-three representatives from tribal social service agencies, state and local human service agencies, non-profit organizations, elected officials, and schools identified their vision for family support, the opportunities and challenges this new legislation presented and recommendations for next steps in the planning process. This strategic planning process encouraged that the FP/FS effort utilize existing planning documents and needs assessments developed locally and regionally to formulate recommendations.

From these recommendations, Department staff identified three primary methods to ensure the

involvement by a variety of groups and communities, described as follows:

Method 1: Family Services Advisory Council (FSAC) Regional Planning

The seven local Family Service Advisory Councils and Department staff have been actively involved for the last 15 months in examining needs assessment data prior to the initiation of the Department's "Partnership Projects". FSAC participants include a broad representation of human service providers, school personnel, legislators and community members who are familiar with regional issues. See Appendix 3 for members of local and state FSAC's.

To augment involvement, additional community agencies, organizations and family representatives were invited to participate. In each of the five Department planning regions, FSAC members, Department staff and interested community representatives were asked to review local needs assessment data utilized by Managing Resources Montana, Families for Kids (W.K. Kellogg Foundation grant), Partnership to Strengthen Families, Kids Count, and the Department.

The FSAC's provided information regarding:

(a) their region's highest priority target population(s);
(b) geographic location(s) for services;
(c) the basis upon which the decisions were made;
(d) the family support and preservation services currently available to meet the needs of the target populations;
(e) the gaps in services;
(f) the proposed services to receive funding under FP/FS; and
(g) the number of individuals or families to be served and how these services will be linked to other services in the child and family services continuum.

Through a consensus process, each local FSAC then recommended family support and preservation services to be developed and funded in the respective regions. Each FSAC will continue to monitor the progress of both "Partnership Project" and FP/FS services in the region and will conduct a yearly review of progress prior to approving any additional yearly funding. Additional information regarding the regional planning efforts is included in Section II, "Regional Family Preservation/Family Support Recommendations."

Method 2: Inter-Agency Coordination

At the state level, the Department has initiated and will continue discussion on issues related to family support and preservation and to the implications of the plan with the representatives of the Interagency Coordinating Council on Prevention (ICC). This is a legislatively-mandated planning group consisting of department directors of the various human service agencies, the superintendent of public instruction, the attorney general, the Children's Trust Fund chairperson and two community representatives. The ICC provides an on-going mechanism for yearly plan consultation and refinement by key state and community stakeholders.

In an effort to support the Department's new mission of "...supporting community strengths"

and in the spirit of the FP/FS Act with its emphasis on community-focused programming, program decisions and service recommendations were made through a local and established planning process. Additionally, the Department has been involved in a variety of coordinating activities which have key roles in the on-going implementation of the Department's services. These agencies include, but are not limited to:

Advocates for Montana's Children
Bureau of Indian Affairs
Child Care and Development Block Grant Planning Task Force
Department of Social and Rehabilitation Services
Department's Indian Advisory Council
Developmental Disabilities Planning and Advisory Council
Family and Maternal/Child Health Division (Department of Health and Environmental Sciences)
Governor's Child Care Advisory Council
Juvenile Justice Advisory Council
Managing Resources Montana
Mental Health Association of Montana
Montana Hunger Coalition
Montana Association for Homes and Services
Montana Adoption Resource Center
Montana Coalition Against Domestic Violence
Montana Council for Families
Montana Supreme Court
Montana Board of Crime Control (Department of Justice)
Persons with Disabilities Advisory Council
State Head Start Advisory Council
State Interagency Coordinating Council on Prevention
State Rehabilitation Advisory Council
Substance Abuse Prevention Division (Department of Corrections and Human Services)

Method 3: Intra-Agency Coordination

The Department amassed information from the various departmental initiatives that affect specific client populations. These include, but are not limited to:

1. family support and preservation including the "Partnership Project", family-based services, public health, and day/respite care;

2. adoption and foster care including the IV-B and IV-E Plans, independent living services (Building Skills for Adulthood), the Families for Kids Project, and licensing;

3. agreements/contracts with all seven Indian reservations;

4. contracts with programs serving refugees, including minorities other than Indians;

5. Managing Resources Montana (MRM), a program providing services to children with severe emotional disturbances;

6. contracts with programs serving victims of domestic violence; and

7. training and staff development.

The Family Preservation/Family Support Plan has integrated these initiatives where appropriate.

Staff involvement in planning was insured by obtaining input from the Department's standing committees on child and family services, licensing, training and staff development, and juvenile corrections. A FP/FS planning committee was appointed to be responsible for developing the Family Support and Preservation Plan. This plan was developed from all the local and regional information, as well as available internal data and information. Committee membership included bureau chiefs, division administrator, management analyst, program officers, representatives from three non-profit agencies representing family support (Montana Council for Families), adoption (Montana Adoption Resource Center), and domestic violence (Montana Coalition Against Domestic Violence).

The FP/FS planning committee met bi-weekly for four months to review all Departmental goals identified in plans related to family support, family preservation and child welfare and to incorporate those pertinent goals into this plan. Minutes were distributed after each meeting.

Committee members will present this plan to the following organizations during the next six to nine months:

- Building Skills for Adulthood (BSA) Advisory Committee
- Department's Indian Advisory Council
- Local and State Family Services Advisory Councils
- Governor's Child Care Advisory Council
- Department's Child Care Block Grant Planning Task Force
- Montana Coalition Against Domestic Violence
- Families for Kids Project Management Team
- Montana Court Improvement Project staff
- Montana Interagency Coordinating Council on Prevention
- Legislative Oversight Committee on Human Services
- Legislative Oversight Committee on Children and Families
- Department's Training Committee
- Montana Hunger Coalition
- Advocates for Montana's Children
- Crisis Nursery Care Project Advisory Committee
- Partnership for Strengthening Families Project Local Advisory Teams
- The Family-Based Services Provider Group
- Managing Resources for Montana (MRM) Advisory Team
- Montana Youth Justice Council
- Montana Association of Homes and Services for Children
- Mental Health Council for Emotionally Disturbed Youth

The Department also communicates with a large number of other advisory, advocacy and policy groups. Each Department regional administrator will be responsible for insuring that the appropriate groups in their area receive the plan and are adequately informed regarding its purpose. In addition, this plan has been developed in conjunction with Tribal Social Services, the Indian Advisory Council, and the Bureau of Indian Affairs.

The result of initiating both the "Partnership Project" and FP/FS services is the involvement of 26 communities, representing a variety of professional and family stakeholders, in developing a comprehensive family support and preservation continuum of services in the state. These 26 communities and all other organizations and individuals involved in the planning process form the nucleus of a strong, vigorous and committed network of family support advocates.

SECTION II: REGIONAL PLANS AND ACTIVITIES FOR FAMILY PRESERVATION/FAMILY SUPPORT

Data from the Kids Count Data Book, published by the Annie E. Casey Foundation in 1995, confirms what the regional planning efforts deduced--several key indicators of child well-being have worsened in Montana:

- the number of births to unmarried teens (ages 15-19) has increased from 25/1,000 females in 1985 to 34.1/1,000 in 1992;
- percent of teens who are high school dropouts (ages 16-19) has increased from 6.4 in 1985 to 7.0 in 1992;
- percent of families with children headed by a single parent increased from 19.6 in 1985 to 23.1 in 1992.
- percent of children in poverty increased from 19.3 in 1985 to 20.1 in 1992.

Dr. Paul Miller of the University of Montana predicts that the rate of growth for children below the poverty line will continue to exceed the rate of growth of people in general below the poverty line. Additionally, median income of families with children in 1992 is below the national median income ($30,200 versus $35,100) and the percent of children in poor and near poor families (income below 150% of poverty level) in 1992 is higher than the national percentage (34.1% versus 31.5%). Dr. Dan Fox reports in the Family Preservation and Support Five Year Plan, Region V, June 1995 that:

> Numerous factors contribute to the increase in the number of people living in poverty, but two significant ones are the changing employment picture and the rapid growth of single parent families. Although Montana has experienced economic growth, the largest increase has been in low paying jobs (e.g., service sector jobs); this combined with the loss of many industrial jobs (e.g. logging, mining) has had a negative impact on families' incomes (MRM Three-Year Plan).

These risk factors create challenging circumstances for families. One risk factor may not necessarily put a family at risk for child abuse and neglect; however, the combination of several risk factors can create stresses difficult for families to manage.

To address these risks and maximize limited resources to populations which can most benefit from FP/FS services, the Department adopted the following broad goals which have guided communities in developing programs to assist overburdened families in their areas:

1. To develop a comprehensive continuum of services in partnership with community organizations and agencies that will increase the capacities of at-risk families to nurture their children in healthy environments;

2. To decrease the incidence of child abuse and neglect in the targeted populations and avoid unnecessary out-of-home placement of children; and

3. To improve the capability of service agencies to deliver coordinated, family-focused services that are preventive, non-punitive, and culturally responsive.

Planning for family preservation and family support services has been described in a previous section. Because of the large physical size of Department regions and the limited amount of funds available for FP/FS, local Family Service Advisory Councils (FSAC's) targeted specific underserved high-risk areas for services. The following funds were allocated to each region for FP/FS activities for federal fiscal year 1995 based on current total population figures:

Region 1 - Eastern Montana	$27,300
Region 2 - North Central Montana	$44,200
Region 3 - South Central Montana	$54,600
Region 4 - South Western Montana	$63,050
Region 5 - Western Montana	$70,850

Regions 2, 3 and 5 have focused their funds on family support services ($169,650 total) and Regions 1 and 4 have focused their funds on family preservation services ($90,350). Each of these categories is receiving over 25 percent of the total Montana FP/FS allotment.

The following table summarizes Family Preservation and Family Support services funded under the Act for the 1995 Fiscal Year:

SUMMARY OF FP/FS SERVICES

GEOGRAPHIC AREA	CONTRACTOR	SERVICES PROVIDED	POPULATION TO BE SERVED	NUMBER TO BE SERVED	BUDGET
Region 1 Valley County	HiLine Home Programs	Intensive, short-term family preservation services including a therapeutic home visitor model, referral and resource services, and development of self-sufficiency skills	Families whose children are at risk for out-of-home placement	12-15 fam.	$27,300
Region 2 Blackfeet Reserva-tion	Blackfeet Tribal Social Services	Intensive, long-term family support serv-ices, including home visiting, parent education (e.g. anger management, self-sufficiency skills), and mental health therapy	Families at risk of child abuse or neglect, families with emotionally disturbed children, and families with status offender adolescents	15 fam.	44,200

Region 3 Fergus County	Families United	Long term family support services including home visiting, resource and referral services, and parenting support group	Families at high risk of child abuse or neglect	15 fam.	25,000
Stillwater County	Child Protection Team	Family respite services, mediation and emergency alert system home visiting emphasizing parenting and communication skill-building, resource and referral services, parent support group	Families at high risk of child abuse or neglect	24 fam.	25,000
Region 4 Beaveherhead, Broadwater Deerlodge, Jefferson, Gallatin, Granite, Lewis and Clark, Madison, Meagher, Park, Powell, and Silverbow	12 counties:	Intensive, family preservation (development of "preservation and permanency plans") which may include purchase of services to enhance family functioning, meet basic family needs, and reduce of-of-home placement of children; and train staff in "family centered" methods of child welfare practice	Children and families in Region IV who have active protective service involvement with the Dept.(i.e. families of origin, extended, adoptive or foster families)	20-25 families	63,050
Region 5 Sanders County	Professionals United for Families	Implementation of info and referral telephone line to link individuals, agencies, and families to local and regional resources and services	High risk families	40 fam. or indiv.	10,850
Ravalli County	FP/F Services Project	Home visiting services to enhance the physical and social development of families and	Families with children ages birth to three	10 fam.	12,850

children; family support training to home visitors			
Family Violence Education Program	Families in 4 parent organizations; Ravalli Co. school personnel, Trapper Creek Job Corp students	200 ind.	4,275
Literacy services	Low literate people age 16 and older; low-literate parents with children birth to 8 years	25 ind.	1,500
Corvallis Family Involvement and Outreach Program-referral and resource service; Love & Logic Community Parent Training	Parents with students in Ravalli Co.; home school parents in Ravalli Co.; parents served by literacy program	70 and 20 parents respect.	6,850 2,570
Intensive family support and youth focused behavior change services	Families with children who are at risk for emotional/behavioral disorders, conduct disorders, out of home placement, delinquent or criminal behavior, failure in school, or dropped out of school	4 fam.	17,140
Regular, as-needed, or emergency respite services	Families in crisis	15 fam.	10,700
Coordination of all services within project and promotion of collaboration among participating agencies			4,115

Additionally, $28,091 has been designated for training, technical assistance, and on-going planning (See Section III) and $32,010 has been allocated for the evaluation contract with Trankel Research and Analysis (See Section VI).

A brief synopsis of each region's FP/FS services follows with additional information describing the regional efforts in Appendix 4.

Region 1 -Eastern Montana

Description: Eastern Montana is a vast geographic area which covers seventeen counties and includes two Indian reservations (Ft. Peck and Northern Cheyenne). The region has three local FSAC's in the Miles City, Glendive, and the Hi-Line areas.

"Partnership Project": Miles City, Glendive, and Sidney are "Partnership Project" sites targeting high risk families with children prenatal to five years old. Glasgow is also a "Partnership Project" site.

Family Preservation/Family Support: The three councils reviewed a "Community Survey of Services" (Appendix 4.1) and unanimously recommended that Glasgow receive family preservation program funds. This program will provide basic crisis intervention services to overburdened families currently in the Department's system and will provide the foundation for further development of family support services. A request for proposals is currently being developed for purchasing family preservation services in that area.

Region 2 - North Central Montana

Description: North Central Montana includes nine counties and three Indian reservations (Ft. Belknap, Rocky Boy and Blackfeet).

"Partnership Project": In spring 1994, the local FSAC's reviewed needs assessment information presented from three geographic areas being considered for $72,000 in "Partnership Project" funds. Those areas were: Hill and Blaine Counties including the Rocky Boy and Ft. Belknap Reservations; Cascade County, including Great Falls; and the Blackfeet Reservation. The geographic area of Hill and Blaine Counties, including Ft. Belknap and Rocky Boy Reservations, was chosen to receive "Partnership" funding beginning in 1994. Cascade County began receiving "Partnership" planning funds in April 1995.

Family Preservation/Family Support: The Blackfeet Reservation was chosen as the site for FP/FS services because of its high unemployment rate (over 50%), the high out-of-home placement rate of Indian children (over 24% compared to the state's Indian population of approximately 10% of the under-age 18 population), the high incidence of poverty among families, and the limited number of social service resources available to families. The project will provide in-home services to 15 families, link the child and family with appropriate community agencies, and strengthen the family's coping skills and capacity to function effectively in the community.

Details of the "Partnership to Strengthen Blackfeet Families" proposal is included in Appendix 4.2 along with the "Blackfeet Law and Order Vision." Appendix 4.3 includes pertinent excerpts of a regional three-year plan which focused on services to children with serious emotional disturbances and has been updated to a five-year plan including FP/FS services.

Region 3 - South Central Montana

Description: South Central Montana includes eleven counties and the Crow Indian Reservation.

"Partnership Project": The FSAC funded over $200,000 in "Partnership Project" services to overburdened families in Yellowstone County.

Family Preservation/Family Support: The local FSAC determined that FP/FS funds should go to rural, underserved counties and sent out a "Request for Proposal" (Appendix 4.4) to the Child Protection Teams serving these rural counties. Four requests for FP/FS funding were received and Lewistown and Columbus were chosen. Copies of the two proposals are included in Appendices 4.5 and 4.6.

Region 4 - Southwestern Montana

Description: Southwestern Montana includes twelve counties.

"Partnership Project": This region has the most communities involved in "Partnership" efforts. Bozeman, Beaverhead/Madison Counties, Granite County, Deer Lodge County, and Powell County have all received funds for services and Silver Bow County and Lewis and Clark County have received "Partnership" planning grants.

Family Preservation/Family Support: The Department's Regional Administrator and local FSAC adopted a "Region IV Advisory Council's Family Service Plan" for 1995 in early February of this year. The plan summarizes the initiatives in the region that are designed to strengthen and preserve families, including Families for Kids project, Managing Resources Montana, Continuum of Care (hard to place youth), Partnership to Strengthen Families, and Family Support and Preservation. The plan targets all children and families who have open active protective service cases with the Department. These families include biological families, extended families, foster families and adoptive families. This region has designed a unique "preservation and permanency" team concept that includes family members and professionals developing a family preservation and permanency plan. Details of this endeavor are on pages 6-8 of the plan in Appendix 4.7.

Region 5 - Western Region

Description: Western Montana includes seven counties.

"Partnership Project": "Partnership" funds have been provided to Libby-Troy, Eureka and Missoula for services and to Flathead County for planning.

Family Preservation/Family Support: Four underserved non-"Partnership" communities with high evidence of overburdened families were considered for FP/FS funds. Three proposals were received and two communities were chosen for funding, Ravalli County and Sanders County. Copies of the Region 5 "Family Preservation and Support Five Year Plan" and the two proposals are included in Appendix 4.8. The Plan includes a detailed needs assessment profile for Region 5 along with the information from Sanders and Ravalli Counties.

SECTION III: TRAINING AND IMPLEMENTATION

Training is a key element in each phase of implementation of this plan. The Department's Training Committee has developed a family support training strategy that includes "Guiding Principles for Family Support Training," a multiple-year strategic training plan, and a Staff Training Assessment Survey regarding family support. (Refer to Appendices 5-7.)

This is a significant expansion from the prior training developed by the department. In the past, training plans focused on out-of-home placement services to children and foster parents. Current and future training plans will reflect the department's commitment to protect children while strengthening and supporting families in a respectful and culturally appropriate manner.

Family preservation/family support training is driven by long- and short-range training plans with the advice and review of the training committee.

The current three-year strategic training plan focuses on family support and preservation. By the end of the three-year period, competency-based training will be reviewed and analyzed in relation to the current system. Recommendations regarding implementation will be formulated.

The Department is in the process of establishing a training institute at the University of Montana. This institute will be a consortium of agencies including: the Department, the University of Montana, Montana State University and the Montana Council for Families. The focus of the institute will be:

- training for the Department's continuum of service providers and consumers;
- applied research in specific topic areas including competency based training and strategic community planning for family support; and
- grant writing and resource development for the state family support and preservation system.

The Training Standing Committee attempts to eliminate barriers to effective training. The Committee works closely with the personnel office to insure that training reflects the mission of the Department.

The Child and Adult Protective Services (CAPS) automated data system will require a great deal of training time before, during, and after implementation. The CAPS program has initiated training in anticipation of the July 1, 1996 system conversion. CAPS will continue to provide on-going training to staff and technical support to users.

This change in philosophy to FP/FS will require additional training. A process for the dissemination of this plan will be developed by the training committee. Relevant portions of the plan will be distributed to appropriate groups and individuals.

Training and Technical Assistance for Family Preservation and Family Support

The Department has contracted with Montana Council for Families (MCF) to provide a variety of technical assistance and training to all twenty "Partnership Project"s and all Family Preservation and Support Projects. The technical

assistance includes research on pertinent issues related to family support and preservation, telephone consultation, meeting consultation, public education programs (e.g., "Building on Family Strengths," "Effective Parent Support Programs," etc.), topic-specific training (e.g., "Building Strong Collaborative Efforts," "Native American Family Support Issues," etc.) and assistance with local planning efforts.

The Montana Council for Families publishes a quarterly newsletter, Families, which is sent to all FP/FS and "Partnership Project"s along with a monthly mailing of information related to program development, implementation and evaluation, national trends in family support and preservation, pertinent state and federal legislative activities, and information on local, state and national training opportunities.

MCF also provides the project coordinator for the "Partnership Project". The coordinator is additionally responsible for assisting the Department's local Family Service Advisory Councils, the Department's Management Team and Department Regional Administrators in developing, implementing and evaluating FP/FS services. The "Partnership Project" coordinator serves as the Family Services' alternate representative to the Interagency Coordinating Council.

SECTION IV: COORDINATION AND INTEGRATION EFFORTS

Collaboration between the Department and other service agencies, at both the state and local level has resulted in better coordination of public/private initiatives and in the identification of common service populations. Examples of integration efforts across agencies which will enhance and complement the goals and objectives of this plan include:

1. The Department's "Partnership Project" and the Family/Maternal/Child Health Bureau are examining how to integrate their respective data collection and analysis systems to enhance the delivery of prenatal, prevention and family support services in a coordinated manner.

   Inclusion of county public health representatives as one of the key stakeholders in "Partnership"communities resulted in several county public health agencies becoming contractors for "Partnership"services. In other "Partnership"communities, county public health services provide initial assessment and referral services or supervision in conjunction with "Partnership"projects.

   Staff from those agencies jointly planned and delivered legislative testimony in early 1995 regarding their individual programs which clearly supported the other agency's services as integral to the success of their projects.

2. Representatives from the Medicaid Targeted Case Management and EPSDT programs, Family/Maternal/Child Health Bureau (Title V), "Partnership Projects" and Department staff are jointly assessing targeted case management services for"Partnership Project" clients and Family/Maternal/Child Health Bureau clients.

3. The Independent Living Services (Building Skills for Adulthood) project, youth employment programs through the Department of Labor, the University of Montana, Conservation Corps (an AmeriCorp project), and the Juvenile Corrections Program are coordinating efforts to achieve self sufficiency for many of their common clients.

4. A North Central Region family-based services program,"Partnership Project," Bureau of Indian Affairs and the Blackfeet Nation have conducted joint planning and initiated a family support project on the Blackfeet Reservation.

5. The Families for Kids project has conducted joint planning with the seven reservations and the BIA and is working to achieve permanency for Indian children in foster care.

6. FP/FS training has become a joint effort. In April 1995 the first Child Abuse Prevention and Family Support Conference was sponsored by: Department's "Partnership Project", Children's Trust Fund, Montana Council for Families, and Montana Adoption Resource Center. This event was attended by 190 participants. Plans are already underway for next year's conference to be held in Billings.

All of this has led to greater cooperation and integration of service delivery than previously existed in the state.

SECTION V: STATEMENT OF NEED

The needs of the continuum of services reflected in this plan were identified during the planning process described in Section I. The local advisory councils identified and prioritized the needs in each of their respective regions. Internally, needs data was identified from statewide data that is collected by the Department's Client Database information system. Additional needs data and information was provided from the various plans that are managed by the department. In general, the data reflects systemic needs ranging from prevention and family support to out-of-home care services.

This plan addresses three levels of need within the continuum of services:

- the need to create family support services that are preventative in nature;
- the need to create additional family preservation services to build on family strengths; and
- the need to improve and expand existing community-based services to meet the needs of families who are experiencing severe emotional disturbances.

A: Child Protective Services (CPS) Investigations, 1985 - 1994:

Basic data on CPS investigations completed by the Department's social work staff is available from the Montana Protective Services Information System (PSIS) for a 10-year period: SFY85 - SFY94. This basic PSIS CPS data includes the number of child abuse/neglect referrals received, investigations completed, alleged incidents, substantiated incidents, and number of children involved in investigations. The Department's CPS Investigations data does not include child abuse/neglect investigations conducted by Tribal CPS workers on Montana reservations -- but it does include CPS investigations on reservations where Department staff, rather than Tribal staff, are authorized to conduct CPS investigations.

The Department's CPS Investigations data reveals an increase in every category over the past ten years, including:

- an 89.0 percent increase in the number of reports of alleged abuse or neglect incidents, from SFY85 (8,708 alleged incidents) to SFY94 (16,456 alleged incidents);
- a 46.4 percent increase in the number of substantiated incidents of abuse or neglect, from SFY85 (3,610 substantiated incidents) to SFY94 (5,282 substantiated incidents);
- an 84.2 percent increase in the unduplicated number of children involved in CA/N investigations from SFY85 (7,328) to SFY94 (13,498); and
- a 39.5 percent increase in the number of CPS investigations/referrals completed from SFY85 (6,361) to SFY94 (8,871).

B. Out-of-Home Placements:

Data on the number of children/youth in the Department's out-of-home placements (foster care services for department-custody children, Juvenile Probation youth, and Indian children in foster care on the reservation under Title IV-E contracts) is available from the Department's Client Database System. Using a 10-year period from SFY85 to SFY94, out-of-home placements increased 49.8 percent from SFY85's 2,390 to SFY94's 3,580.

C. Race/Ethnicity:

The United States Census Bureau estimates the 1993 population of Montana to be 836,000. This number includes: 91.3 percent Caucasian, 6.2 percent Indian, 1.7 percent Hispanic, .2 percent African-American, and .6 percent Asian.

The following is the breakdown by race/ethnicity and age:

Ages 0-19		Ages 20-64		Age 65+	
Caucasian	225,000	Caucasian	442,000	Caucasian	108,000
Indian	24,000	Indian	26,000	Indian	3,000
Hispanic	6,000	Hispanic	7,000	Hispanic	1,000
Afr.-Amer.	1,000	Afr.-Amer.	1,000	Afr.-Amer.	0

The additional .6 percent of the population is divided among various Asian ethnic groups that include: Hmong, Vietnamese, Lao, Cambodian, Korean, Japanese and Chinese.

D. Needs of Indian Children in Montana:

While the majority of Montana's population is Caucasian, approximately 6.2 percent of the population is Indian. However, approximately 10 percent of the population under age 18 is Indian. In SFY94, 14 percent of the total number of investigations completed by the Department involved Indian children.

The data indicates that a disproportionate number of children in the Montana foster care system are Indian. Approximately 24 percent of the children in the Department's out-of-home placements in SFY94 were Indian. Data gathered under the Families For Kids Project indicates that at least 45 percent of the children in care for two years or longer are Indian.

In order to address the needs of Indian children in Montana, the Department, in conjunction with the Bureau of Indian Affairs, established the Indian Advisory Council in August, 1994. The Council and the department have identified needs relevant to Indian families and children. Those needs are prioritized by the Council members as:

- need for more Indian foster and adoptive homes:
  Montana lacks a sufficient number of Indian foster and adoptive families to meet the needs of the Indian children in the system and to assure compliance with the Indian Child Welfare Act. Included in this category is the need to coordinate recruitment, licensing and training. More culturally appropriate programs are needed help to identify problems that lead to placement so

that the high number of Indian children in care can be reduced;

- need for permanency planning alternatives:
  For most tribes in Montana, termination of parental rights with adoption placement with strangers (defined as non-relative placement) is unacceptable. Therefore, adoption is not an option for most Indian children in the foster care system. The Council identified a need to develop permanency alternatives that do not involve termination of parental rights;

- need for methods to address juvenile delinquency issues:
  The Council identified a complete lack of services to address the needs of youth who engage in delinquent behavior; and

- need for joint training of department, tribal, and BIA staff:
  Joint training can increase the ability of the agencies to work collaboratively because it can emphasize that all agencies must address the same problems. Therefore, the Council identified joint training for social service staff of the Department, the tribes, and BIA. The Council thought this joint training must include cultural competency.

E. Families for Kids Project:

Montana recognizes a need for more effective permanency planning. A significant number (620) of children in foster care in Montana have been in care for two years or longer. Montana has long recognized the need to achieve permanency in the lives of these children. The Montana Families For Kids Project is a three-year grant from the W. K. Kellogg Foundation. The initiative focuses on children in the context of their families and on families in the context of their communities. The initiative approaches planning from the child's perspective and examines permanency "through the eyes of the child."

The Families for Kids Project will focus greater emphasis on permanency planning in the child welfare system and find permanent homes with life-long family connections for children in foster care who are not returning to their birth families.

Montana citizens, through a series of visioning meetings held in seven Montana communities and on each of the seven Indian reservations, identified objectives for the project as follows:

- promote permanent placement in a time frame that acknowledges the needs of the child;

- promote a system that recognizes that families have an inherent right to play a major role in planning for their children;

- shift the focus of protective services from removal of children to family preservation;

- enhance permanency planning efforts by providing culturally relevant training;

- improve collaboration with all service providers in order to focus on the child's need for permanence;

- assist Indian Tribal Governments with permanency planning for children; and

- expedite a permanent placement for each child by reducing the number of workers assigned to the child and the number of foster care placements the child experiences.

The general target population for the Project is those children who have been in foster care for two years or longer (including Indian and non-Indian children in care under state district court order or tribal court order). The first priority is children who are in the permanent custody of the department or are otherwise available for permanent placement. The second priority is children who are not legally free but who have a case plan of adoption or other permanent placement.

F: Juvenile Corrections Program:

The Department's Juvenile Corrections Program, which has been part of the Montana Department of Family Services since 1987, will be transferred by the action of the 1995 Montana Legislature, to a new Department of Corrections which includes both adult and juvenile corrections. During the past two years, the Juvenile Corrections Division has developed a unique and positive philosophy of juvenile corrections services, based upon four basic principles applied to each segment of that program as appropriate to fulfill the mission of family support and preservation:

1. children are treated in the most appropriate, least restrictive environment possible;

2. secure environments are used only in the case of "clear and present danger;"

3. increased use of Transitional Living Services is employed whenever possible and appropriate; and

4. the program is community-based and community-needs oriented.

With the transfer of the Juvenile Corrections Division (JCD) to a different department, the children/youth services staff of the new Montana Department of Public Health and Human Services (DPHHS) must assure that coordination and collaboration between JCD and DPHHS will continue. This collaboration will assure a family support and family preservation emphasis in the Montana Juvenile Corrections program. See Appendix 8 for specifics regarding the Juvenile Corrections Program.

SECTION VI: EVALUATION

A. THE PARTNERSHIP TO STRENGTHEN FAMILIES PROJECT

To be certain that activities funded under this project achieve the expected outcomes, the Department decided to contract with an independent contractor to perform the evaluation. The Department hired the evaluator at the beginning of the project. The Department issued a Request for Proposals (RFP) in early 1994 and contracted with Trankel Research and Analysis to perform the evaluation. The firm has been included in all phases of planning for the project and performs numerous functions:

1. develop a standardized evaluation process for each project site;

2. serve as a resource to local communities in developing their local evaluation plans;

3. provide on-going consultation to the management team on implementation problems;

4. develop a database management system using Paradox for Windows (Version 5.0); on-site training and follow-up technical assistance on data entry and report preparation;

5. prepare reports summarizing successes in meeting project outcomes; and

6. develop an evaluation methodology that includes:

    a. profiles of participants including major demographic information;
    b. program utilization data (types of referrals made and services received);
    c. client data on length and intensity of services provided;
    d. success of intervention methods in meeting outcomes and
    e. participant and community satisfaction ratings.

Appendix 9 includes a sample site evaluation plan, the projected "Evaluation Project Activities and Timelines" for March 1995 - March 1996, summary of Testimony for Legislative Hearing, Forms List, and Form Completion Checklist.

B. FAMILY PRESERVATION/FAMILY SUPPORT

The same evaluation process and contractor utilized for "Partnership Projects" will be utilized for FP/FS funded programs. Local Family Service Advisory Councils will continue to monitor programs through reports from the evaluator and FP/FS projects and will insure that programs are accountable to the families being served.

The following measurements of progress (referred to as "outcomes" in the "Site Evaluation Plan" in Appendix 9) will be utilized to determine the effectiveness of services provided with FP/FS funds and "Partnership Project" funds:

1. Promote partnerships (collaboration) among existing community organizations to provide a comprehensive continuum of services for families at risk.

2. Enhance and expand existing services to provide a nurturing community environment for healthy family and child development.

3. Promote positive parenting skills and attitudes toward healthy family functioning.

4. Educate caregivers regarding healthy child development, appropriate expectations for their child(ren)'s behavior, and appropriate methods of discipline.

5. Make appropriate referrals to community resources and encourage families to effectively utilize these resources in order to promote family self-sufficiency.

6. Provide appropriate support services (such as child care and transportation) to remove barriers to participation in services and family development activities.

7. Support families in becoming empowered to be their own most effective problem solvers and change agents.

8. Help families develop social support systems to alleviate social isolation and promote family self-sufficiency.

These measurements of progress will be determined through a variety of evaluation methods, including pre- and post-family assessments, client satisfaction surveys, log of family contacts, etc. A detailed list of evaluation forms developed for both the "Partnership" and FP/FS projects is included in Appendix 9.

FP/FS project staff and the evaluation contractor jointly determine the necessary forms to effectively measure progress. The evaluation contractor provides training in utilizing the evaluation methods, in "interrater reliability," and in data collection.

A detailed evaluation report on FP/FS services will be available at the end of each fiscal year for review by the local projects, FSAC's, Department of Health and Human Services, and the Department.

C. THE FAMILIES FOR KIDS PROJECT

The evaluation of the Families for Kids Project will be conducted by Trankel Research & Analysis, the same evaluators on contract to evaluate the "Partnership Project".

The research methodology to be used for the Families for Kids Project evaluation will be developed in consultation with the W.K. Kellogg Foundation, Montana Adoption Resource Center (MARC) staff, Department staff and other key participants identified by the MARC Project Director. One of the goals of the Families For Kids Evaluation is to maintain consistency with the evaluation process currently underway in the "Partnership Project". One of the first objectives is to determine which of

the "Partnership" procedures are applicable to (or adaptable for) the FFK Evaluation.

D. A QUALITY ASSURANCE PLAN TO EVALUATE OUT-OF-HOME CARE SERVICES

A proposed "Quality Assurance Plan to Evaluate Out-of-Home Care Services" is included in Section IX-C. This proposal for a quality assurance plan was created in response to the audit conducted by the Office of the Legislative Auditor on foster care licensing and related foster care issues.

The following is an outline of the basic components of the proposed plan:

1. the Department will determine the extent to which written case plans accurately describe the presenting problems in the case and the appropriateness and relevance the prescribed services have to solving the problems;

2. the Department will determine the extent to which the services listed in the case plan are the services being provided to the clients;

3. the Department will determine if the services that are being provided are effectively insuring that the family will be reunited, or that permanency is being established; and

4. the Department will conduct a survey of Foster Care Review Committees statewide to determine the extent to which they understand their roles, and the effectiveness with which they fulfill their responsibilities.

Implementing the plan will require a combined effort of central office and field staff, as well as clients and foster parents. Considerable preparation will be necessary to decide who needs to be contacted and interviewed, and what questions need to be asked.

E. CAPS (Child and Adult Protective Services)

Implementation of the Department's statewide automated system, CAPS, will greatly enhance the Department's ability to ensure quality in its deliverance of services.

SECTION VII:

TITLE IV-B, PART 1 CHILD WELFARE SERVICES PLAN – FY96 OBJECTIVES

This Montana FP/FS plan also serves as the FY96 Title IV-B, Part 1 Child Welfare Services Plan. Much of the first year of this Montana Five-Year Integrated Plan for Family Support and Preservation overlaps with and will be spent implementing the FY95 Montana Title IV-B (Part 1) Plan for Child Welfare Services.

The FY95 IV-B (Part 1) plan was, in many respects, a pre-cursor to this broad-ranging and inclusive five year IV-B (Part 2) plan because the FY94 and FY95 Montana IV-B (Part 1) plans signaled the Department's and the state's commitment to shifting more resources to abuse/neglect prevention services, to family support services, to family-based services to prevent out-of-home placements and to more effective permanency planning for all children receiving services from the Montana Department of Family Services.

Indeed, it would probably not have been possible to pull together and execute this five year plan if the Montana DFS IV-B(1) plans for FY94 and FY95 did not already contain many of the collaborative elements of the five year planning process and had not lain the groundwork for family-based services, abuse/neglect prevention, and family support and preservation services. In that sense this five year plan is not a departure from the past, but rather another step along the evolutionary path.

Vision of a Family-Centered, Community-Based Children's Service System:

This FY96 IV-B plan is rooted in a vision of a Montana protective services strategy that addresses the need of children at risk of abuse or neglect to be protected by family-centered, community-centered means. The Department's vision is to achieve the protection of Montana's children from abuse and neglect by using methods and tools which respect the strengths and dignity of families and realistically and effectively support the best possibilities of a family's emerging from patterns of abuse or neglect.

This new standpoint remains the Department's vision of Montana children's services -- a vision of a family-centered system in which every child and every family entrusted to the concern and care of the department is treated with dignity and respect. The Department's attention focuses not only on family problems but also on family and community strengths, and implementation of this vision requires enhanced efforts to strengthen prevention and family support resources.

The Department recognizes that a community-based and family-centered services system can exist only if a strong infrastructure is created to support it. This system must be a creation of the community it serves, and cannot be imprinted from outside. Therefore, it must be inclusive, not locking out any member or group in the community, and must be based on a community consensus-building process. Thus, the Department's IV-B(1) plan for FY96 recognizes the continued necessity of expanding collaborative efforts, especially efforts such as the Department's Partnership to Strengthen Families Project initiated in 1994.

The Department's commitment to this vision means that this IV-B plan insists that an effective and acceptable approach to the problems and issues of protecting children and adults must include:

1. strengthening abuse prevention efforts and related family support resources such as day care, family-based services and early intervention services;

2. integrating such family support activities with heightened efforts to reduce domestic violence and spouse abuse;

3. renewing and deepening the Department commitment to permanency planning -- defined as planning to assure that all Department child clients have a life-time family connection;

4. understanding the need for a full and integrated continuum of services (from prevention through intensive out-of-home treatment); and

5. giving adequate attention to quality assurance -- meaning that in addition to assuring compliance with important, essential paperwork and documentation of work performed, giving increased attention to the achievement of critical success variables that define and measure the extent of our success in protecting children and adults.

One positive indication of the state's commitment to family support and preservation is the 1993 Montana Legislature's enactment of the Montana Family Policy Act (HB18, 1993 Legislature). This legislation guides government actions that impact children and families.

This Montana FY96 IV-B Child Welfare Services Plan reflects this changing philosophical focus, and continues the initiatives and efforts first announced in Montana's FY94 IV-B Plan.

The Department must protect children and adults from abuse, neglect and exploitation (as articulated in the mission statement). The basic goal of the department is to meet this mandate on a day-in, day-out basis within the framework of law and policy and utilize the available resources to the fullest extent possible.

The goals and objectives of this FY96 IV-B(1) plan do not address these on-going fundamental mandates as such; instead they address and focus on the *un-met needs*. In focusing on un-met needs (rather than on the on-going work of child and adult protection), this IV-B(1) plan does not undervalue the importance and centrality of such day-in-day out protective services practice which is the vast bulk of the Department's work. This plan presupposes all of that on-going work, and is an attempt to move the Department to another level of effectiveness in carrying out its mandate.

GOALS: The following are the goals for the Montana IV-B, Part 1 plan for Child Welfare Services. Objectives and action steps related to these seven IV-B(1) plan goals are integrated into the objectives and action steps found in Section IX of this five-year plan.

1. During the next year, the Department will continue to shift the focus of service delivery toward serving family units holistically.

   The primary goal of services will be both (a) family preservation and family support and (b) protecting children and adults while preserving the family (wherever this is possible and consistent with effectively protecting persons from violence, abuse and neglect).

2. The Department will continue to work cooperatively with mental health, youth court probation officers, the Managing Resources Montana (MRM) teams for severely emotionally disturbed (SED) youth and other community agencies to reduce the use of in-patient psychiatric care and to increase and improve the system of community-based services to families with SED youth.

3. With the transfer of the Department's Juvenile Corrections Division (JCD) to a new Montana Department of Corrections, the new DPHHS's children/youth services staff will continue to coordinate and collaborate with JCD to assure a family support and family preservation emphasis in the Montana Juvenile Corrections program -- continuing to plan jointly, to the greatest degree possible, for all children rather than address the needs of discrete groups.

4. The Department will continue to design and implement a new data/information management and case management system for children and adult protective services (CAPS), targeted for full implementation by July, 1996.

   The CAPS system will enhance the Department's ability to respond to client needs, provide helpful case management assistance and essential data for program management, and fulfill state and federal administrative requirements, including federal requirements under the AFCARS, NCANDS and SACWIS programs. (AFCARS: Adoption and Foster Care Reporting System. NCANDS: National Child Abuse and Neglect Data System. SACWIS: Statewide Automated Child Welfare Information Systems.)

5. The Standing Committee on Training will develop a multi-faceted, comprehensive training plan that will enhance the skills and abilities of staff at all levels to implement the changing policies of the department.

   The FY 96 training plan will include an up-dated curriculum for foster parents and day care providers. Also, the Montana Child Abuse and Neglect (MCAN) training curriculum will be revised and up-dated to reflect the evolving philosophy toward greater support for family preservation and include training in domestic violence issues (in cooperation with the Montana Coalition Against Domestic Violence).

   The Department will continue to use Title IV-E funds as a key funding source for training, and will expand the search for additional uses of IV-E funds as well as the search for new training funds.

6. The Department will increase and improve services to Indians through increased cooperation. such as the Indian Advisory Council created by a joint DFS-Bureau of Indian Affairs effort. Emphasis will be placed upon self-determination and cultural awareness, and on increased Indian access to planning for service delivery.

7. The Department, in cooperation and conjunction with other state and private agencies, will implement the five-year integrated family services plan.

PRE-PLACEMENT PREVENTION AND FAMILY REUNIFICATION SERVICES
[FY96 UPDATE: 6/30/95]

1. PRE-PLACEMENT SERVICES:
The following pre-placement services are available within each Department region during FY96:

- 24-hour emergency services
- Emergency shelter:
  - Receiving homes
  - Shelter care facilities
  - Spouse abuse shelters
- Child protective service investigations
- Case planning
- Case management of on-going CPS cases
- Child protective services day care
- Crisis Care (Crisis Nursery) Services (part of the "Partnership Project")
- Child Care and Development Block Grant Day Care Services
- Child Care Resource and Referral (R&R) services
- IV-A At-Risk Child Care, AFDC Day Care and Transitional Day Care
- Array of family support services funded by the Partnership to Strengthen Families Project
- Managing Resources Montana: Managed Care for SED youth: case management/treatment
- Home-based family preservation services (including IV-A Emergency Assistance):
  - Family-based services for placement prevention
  - Home attendant services
  - Family therapy
  - Individual and group therapy
  - Social services
  - Respite care
  - Training for parents
- Information/referral/follow-up:
  - Alcohol and drug counseling/treatment
  - Financial assistance
  - Handicapped children's services
  - Medical/health services
  - Planned parenthood
  - Legal services
- Volunteer programs:
  - Big Brothers and Sisters
  - Parents' Anonymous (and similar support groups)

2. FAMILY RE-UNIFICATION SERVICES:
The following re-unification services are available in each Department region during FY96:

- Foster care:
  - Permanency planning for life-long family ties
  - Building Skills for Adulthood (Independent Living) Services

- Voluntary placement
- Court intervention
- Residential treatment
- Recruitment and training
- Policy and standards
- Judicial determination

- Case review systems:
  - Case plan
  - Supervisory review of case progress
  - Periodic review
  - Dispositional hearings
  - Parental participation
  - Other procedural safeguards
- Adoption:
  - Recruitment and training
  - Public awareness
  - Exchanges
  - Subsidies
  - Policy and standards
  - Legal services
  - Post-adoption services:
    - * Searches
    - * Support groups

SECTION VIII: BUILDING SKILLS FOR ADULTHOOD PROGRAM

This federally funded independent living program, now called the Building Skills for Adulthood Program, provides supportive services and cash stipends to youth 16 years of age or older who are either preparing for discharge from foster care or have been out of foster care for no more than six months.

The Building Skills for Adulthood Program has adopted the Child Welfare League of America (CWLA) standards for independent living services which include social work, educational, financial, employment, health, housing, legal, socialization, cultural, religious and recreational services.

According to federal guidelines, each participant must be provided with a written transitional independent living plan. The plan must be based on an assessment of his or her needs and must be incorporated into his or her case plan. The plan serves as a basis for determining services.

The skills development portion of the program focuses on establishing a support system, being able to access community resources and making responsible informed decisions. The youth is assisted in this process by case workers, foster care providers, and volunteer mentors who work as a team. Birth family is involved in the transitional process whenever possible.

Baseline data on skills level is obtained when the youth completes the initial life skills assessment. The youth is then matched with a registered mentor to work on mutually agreed upon objectives as identified in the transitional living plan. Measurements of improvement in life skills are obtained by re-assessing the youth at regular intervals.

Long-term evaluation of the program will become available as soon as the Department's Child and Adult Protective Services (CAPS) computer system is on-line in 1996.

The program is guided by a multi-disciplinary Advisory Council. Input from youth is provided through periodic focus groups. The five-year plan includes establishing Youth Advisory Councils throughout the state.

Refer to Section IX for the goals, objectives, and action steps of this program.

SECTION IX: PROGRAM GOALS AND OBJECTIVES

Section IX of the Montana Five-Year Integrated Plan contains the comprehensive listing of programs provided by the Department in the areas of family support and preservation, protection, and quality assurance. The programs listed in this section are those provided to families with minor children. Funding for the programs is derived from a variety of sources including, but not limited to Title IV-B, parts 1 and 2; Community Development Block Grants for Child Care; other federal funds and grants; state general funds; and private grants.

Section IX is divided into three subsections. Subsection IX-A contains the family support and preservation programs, Subsection IX-B contains the protective services programs, and Subsection IX-C contains the quality assurance programs. Each subsection delineates the goals, objectives, and action steps for each program as well as persons responsible and completion date for each action step.

IX - A: FAMILY SUPPORT AND PRESERVATION SERVICES

PROGRAM	GOALS
1. **FAMILY PRESERVATION AND SUPPORT SERVICES**	For specific goals, refer to Section II and the Appendices.
2. **PARTNERSHIP FOR STRENGTHENING FAMILIES PROJECT**	1. Develop a comprehensive continuum of services in partnership with community organizations that will increase the capacities of overburdened families to nurture their children in healthy environments; 2. Decrease the incidence of child abuse and neglect in the Partnership target populations to less than 10 percent; and 3. Improve the availability of service agencies to deliver coordinated, family-focused services that are preventive, non-punitive, voluntary and culturally specific.
3. **CRISIS CARE (CRISIS NURSERY) SERVICES OF THE "PARTNERSHIP PROJECT"**	Provide families with children who are at risk of abuse and neglect with emergency crisis care/crisis nursery services as part of a comprehensive, coordinated array of family support services. Separate funding available for two years only.
4. **CHILD DAY CARE**	1. Improve the availability, affordability and quality of child day care services; 2. Provide child day care assistance to low-income families who are employed and are at risk of needing public assistance; 3. Support activities related to dependent care resource and referral systems and activities related to before- and after-school school-age child care services; 4. Promote the availability of quality child care for all Montana families; 5. Expand the quality and accessibility of child day care programs by supporting day care licensing staff; and 6. Support the activities of the Governor's Child Care Advisory Council.
5. **STATE CHILD ABUSE AND NEGLECT GRANTS**	Fund activities to prevent or treat child abuse and neglect and to assist in responding to reports of medically fragile infants.
6. **CHILDREN'S TRUST FUND: COMMUNITY RESOURCE CENTERS**	Fund innovative prevention programs, public awareness, and education.

PROGRAM	GOALS
7. **BIG BROTHERS/BIG SISTERS**	Meet the needs of at-risk children of single parents by providing positive, same-sex role modeling, healthy adult relationships, an atmosphere for positive growth and self-esteem, and respite for single parents from the stresses of parenting.
8. **BUILDING SKILLS FOR ADULTHOOD: INDEPENDENT LIVING SERVICES**	Assist eligible youth in attaining those attitudes, values, skills and experiences necessary for living independently and being self-sufficient.
9. **REFUGEE RESETTLEMENT PROGRAM**	1. Provide services for effective resettlement of refugees; 2. Assist refugees to become self-sufficient as quickly as possible; and 3. Provide on-going social services to refugee families who need such services.

A-1: FAMILY PRESERVATION AND SUPPORT SERVICES (TITLE IV-B, PART 2)

For the specific services to be provided under Title IV-B, part 2, refer to Section II, Regional Plans and Activities for Family Preservation/Family Support. Also refer to the specific regional plans in the Appendix.

A-2: PARTNERSHIP FOR STRENGTHENING FAMILIES PROJECT

GOAL: Develop a comprehensive continuum of services in partnership with community organizations that will increase the capacities of overburdened families to nurture their children in healthy environments.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Establish 17 comprehensive, intensive, community-based family support programs to provide services to a minimum of 500 overburdened families with children prenatal to three years and/or with families referred to the Department whose children are not at risk of immediate removal.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Provide technical assistance and consultation to community programs regarding on-going program development and implementation.	Partnership Project Coordinator	On-going
2. Negotiate project contracts regarding service delivery.	Partnership Project Coordinator	Annually

Objective 2: Each subsequent year of the Family Preservation/Family Support (FP/FS) Plan, maintain and evaluate the 17 family support programs, modifying program components to meet project outcomes.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Conduct evaluation methodology that includes: descriptive data on client status, program utilization data, profiles of participants, success of intervention methods in meeting outcomes and participant and community satisfaction.	Evaluation Contractor	On-going
2. Provide technical assistance and consultation to community programs regarding evaluation methodology, and data collection and analysis.	Evaluation Contractor	On-going
3. Provide evaluation report yearly regarding outcome attainment, program design changes and recommendations for future funding to the Department, the Montana State Legislature's Joint Appropriation Subcommittee on Human Services, and the local and state Family Services Advisory Councils.	Evaluation Contractor	End of each calendar year

Objective 3: Provide training and technical assistance to "Partnership Project" staff regarding best practice methods, staff training, reporting guidelines, etc.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Provide regular mailings to local "Partnership Project" communities regarding pertinent best practice methods, potential local and national training opportunities, project policy and procedure guidelines, etc.	Partnership Project Coordinator	Every 4-6 weeks
2. Initiate and facilitate telephone conference calls on specific issues related to program development and implementation.	Partnership Project Coordinator	As needed or when requested
3. Circulate and review project quarterly reports to the evaluation contractor, the Department's Regional Administrators and other designated individuals and provide feedback to project staff as appropriate.	Partnership Project Coordinator	Quarterly

4. Participate in the Montana Interagency Coordinating Council on Prevention to ensure Partnership training and integration in other state prevention efforts.	Partnership Project Coordinator	Quarterly

Objective 4: Develop additional funding sources for programs (e.g., Medicaid administrative match, Title IV-A, private donations, public and private grants).

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Initiate pilot efforts in Hill-Blaine Counties to secure Title IV-A federal reimbursement for "Partnership Project" services.	Hill-Blaine Partnership Project Contractor	On-going
2. Coordinate efforts with the Department's Children's Services Refinancing Project Program Officer to expand Title IV-A funding in eligible "Partnership Project" communities.	Partnership Project Coordinator and Refinancing Project Program Officer	1/1/96
3. Coordinate efforts with the state's Medicaid Division and the Maternal/ Child Health Bureau to secure Medicaid Targeted Case Management reimbursement for eligible "Partnership Project" sites.	Partnership Project Coordinator	On-going
4. Pilot efforts in Yellowstone County to secure Medicaid Targeted Case Management for "Partnership Project" services.	Yellowstone Family Support Network and Partnership Project Coordinator	10/1/95

GOAL: Decrease the incidence of child abuse and neglect in the Partnership target populations to less than 10 percent.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Establish baseline data and trend data regarding variables impacting trends.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Collect baseline data from local offices where "Partnership Projects" are being conducted.	Evaluation Contractor	12/31/95
2. Collect trend data from the Department regarding child abuse and neglect reports by county over a 10-year period (1990-2000).	Evaluation Contractor	Annually
3. Analyze baseline and trend data to identify extraneous variables impacting trends.	Evaluation Contractor	Annually
4. Report baseline and trend data to the Department, local "Partnership Projects," the Montana State Legislature, and the local and state Family Services Advisory Councils for their review and recommendations regarding future program delivery.	Evaluation Contractor	Annually

GOAL: Improve the availability of service agencies to deliver coordinated, family-focused services that are preventive, non-punitive, voluntary and culturally specific.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Build and maintain cooperative and collaborative efforts with other state agencies and community organizations to integrate Department-sponsored family support programming with other complementary services (e.g., Montana's Initiative for the Abatement of Mortality of Infants (MIAMI) project, FOLLOW ME, early childhood programs, Cherish Our Indian Children, family-based services)

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Meet regularly with state Maternal/ Child Health Bureau staff regarding coordinating Partnership and Maternal/ Child Health service programs.	Partnership Project Coordinator	On-going
2. Participate in the Montana State Interagency Coordinating Council on Prevention to ensure coordinated service delivery among various state-sponsored prevention programs.	Partnership Project Coordinator	On-going
3. Participate in the Department's Indian Advisory Council process to ensure coordinated service delivery with Indian tribes and urban programs.	Partnership Project Coordinator	On-going

Objective 2: In conjunction with the Children's Trust Fund and Montana Council for Families, sponsor the annual statewide Child Abuse Prevention and Family Support Training Conference for all "Partnership Project", Department and other human service providers.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Review prior year's conference evaluations to determine changes in future programs.	Partnership Project Coordinator	April - annually
2. Survey the Department and local "Partnership Project" staff regarding training needs.	Partnership Project Coordinator	Summer - annually
3. Contract with Montana Council for Families to coordinate the conference including arranging speakers, facilities, marketing materials and public relations, and providing evaluations.	Partnership Project Coordinator	Annually

Objective 3: Provide technical assistance and training on community collaboration methods to local "Partnership Project" teams.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Arrange for training on collaboration or facilitation of community meetings for "Partnership Projects."	Partnership Project Coordinator	When requested
2. Include information on collaboration skill-building in regular Partnership mailings.	Partnership Project Coordinator	Two times per year

A-3: CRISIS CARE (CRISIS NURSERY) PROJECT

GOAL: This new family support program, initiated in 1995, provides 205 families with 437 children who are at risk of abuse and neglect with emergency crisis nursery/crisis care services as part of a comprehensive, coordinated array of family support services. Funded by a grant from the Administration on Children, Youth and Families under the authority of the Temporary Child Care for Children with Disabilities and Crisis Nursery Act of 1986, the target populations for this project are (1) high-risk families with children prenatal to three years old and (2) high-risk families referred to the Department whose children are not at risk of placement. These services will be delivered through the Department's Partnership to Strengthen Families Project at the following locations: Eastern Montana (Miles City, Glendive, Sidney and Glasgow), South Central Montana (Billings), Western Montana (Libby/Troy), Southwestern Montana (Deer Lodge, Powell and Granite Counties), and North Central Montana (Hill and Blaine Counties, Ft. Belknap and Rocky Boy Reservations).

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Develop crisis care services in five Montana locations as part of the Partnership to Strengthen Families project.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Develop initial/interim guidelines, policies, procedures and practices to implement pilot crisis care (CC) services nursery options. Consult with Department program and legal staff, national resources centers and other state and regional and national sources of crisis care expertise.	CC Project Director, Project Management Team and the Project Advisory Council	7/95
2. Collect, develop and distribute information regarding crisis care service options and models.	Project Director and Management Team	4/95
3. Develop a Montana Crisis Care Services state plan.	CC Project Director, Management Team and Advisory Council	9/95
4. Provide crisis care services to children and families in five pilot "Partnership Project" community sites.	Partnership Project Contractors	4/95 and on-going
5. Integrate into "Partnership Project" at end of grant period.	Project Director, Management Team	9/97

Objective 2: Provide training, technical assistance, and evaluation to the five programs offering crisis care services.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Develop culturally-appropriate training components and provide technical assistance as needed.	Project Director, Management Team and contracted trainer(s)	Fall, 1995
2. Conduct statewide crisis care policy and procedures workshop and finalize policies, procedures and guidelines for the delivery of crisis care services.	Project Management Team, consulting with Standing Committees (Child and Family Services, Licensing)	7/95
3. Conduct first statewide crisis care services training.	Trainer(s), via contracted services	Fall, 1995
4. Develop and implement the project evaluation plan.	Project Director and independent evaluator	4/95
5. Submit quarterly reports to the Department and the federal funding sources.	Project Director and independent evaluator	On-going
6. Measure progress on the following performance indicators: (a) decrease in child abuse and neglect incidents or reports in the target population of 205 families; (b) increase in the availability and use of crisis care services by high-risk families in the five "Partnership Project" communities; (c) development of policies, procedures and guidelines for the delivery of crisis care/crisis nursery services; and (d) establishment of the Montana Crisis Care Training Resource Center.	Project Management Team and independent evaluator	Annually

A-4: CHILD DAY CARE PROGRAMS AND SERVICES:

(a) CHILD CARE AND DEVELOPMENT BLOCK GRANT DAY CARE PROGRAM

GOAL: The Montana Child Care and Development Block Grant (CCDBG) Program is designed to increase the availability, affordability and quality of child day care. Federal CCDBG funds are available to low income families who have at least one parent working or working and attending training. CCDBG funding is also used for activities to improve the availability and quality of: early childhood development programs, child care resource and referral services, training of day care providers, before-and after-school child care services for school-age children, day care services for infants and for children with disabilities.

A Child Care and Development Planning Task Force was convened to advise the Department during the initial State Plan development and continues to be an integral part of the CCDBG planning and spending objectives. The Department and the CCDBG Task Force meet approximately four times per year, or more often if needed. Although the Task Force is an advisory board to the Department, the Department continues to respect and follow its advice.

ACTION STEPS AND TIME LINES FOR OBJECTIVES:

Objective 1: Provide day care services to low-income working families on a sliding fee, co-payment basis using CCDBG funds.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Determine family eligibility according to the Montana day care sliding fee scale which sets income parameters and determines the amount of parents' co-payment.	Child Care Resource and Referral (R&R) Agencies	Daily, as applications are received; with quarterly eligibility redeterminations
2. Distribute the allocated funds equitably among the 12 R&R districts according to the approved CCDBG State Plan so that R&Rs may carry out step 1.	Day Care Program Officers	Annual funding cycle

Objective 2: Improve the current child day care delivery system by improving the state day care regulatory process by: maintaining the number of day care licensing staff (Family Resource Specialist/FRS staff) using federal CCDBG funds; amending the Department's day care licensing rules in accordance with the recommendations of the day care licensing task force; maintaining CCDBG funding for the day care

program officer on staff since 1992; and providing merit pay awards to child day care providers for additional training they complete in early childhood education.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Complete the regulatory review process by making necessary rule changes and/or legislative changes.	Day Care Program Officers	12/95
2. Follow the recommendations of the CCDBG Planning Task Force to maintain the five day care FRS positions funded since 1994 by the CCDBG.	Day Care Program Officers	On-going, annually
3. Follow the recommendations of the CCDBG Planning Task Force to maintain federal CCDBG funding for a day care program officer.	Family/Community Support Services Unit; Day Care Program Officers	On-going, annually
4. Follow the recommendations of the CCDBG Planning Task Force to set aside CCDBG dollars for merit pay awards to care providers.	Day Care Program Officers	Annually

Objective 3: Improve the quality and availability of child day care programs by providing contracts and grants to child day care facilities for start-up and expansion and improvement of services.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Initiate the RFP process for competitive grants to day care providers in the following five categories: (1) infant care, (2) children with disabilities, (3) community need for more day care services, (4) school-age child care, and (5) improvements to meet state licensing or registration requirements.	Day Care Program Officers	Annually
2. Provide funding via an RFP process for day care scholarships to service providers receiving start-up or expansion grants to enable providers to care for children from low-income families.	Day Care Program Officers	Annually

Objective 4: Provide funding to the 12 Child Care Resource and Referral (R&R) Agencies to conduct the initial day care provider orientation training required for licensing or registration, to provide skill-development training, and to provide on-going regular technical assistance to day care providers.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Contract with the 12 R&R agencies to recruit and train day care providers.	Day Care Program Officers	Annually
2. Conduct new provider orientation, and skill- development training.	R&Rs	Quarterly, in accord with contract requirements
3. Provide technical assistance to day care providers.	R&Rs	On-going

Objective 5: As recommended by the CCDBG Planning Task Force, fund and assist in establishing a training coordination program in order to more efficiently and effectively provide day care training to providers statewide that will improve the quality of child day care facilities across Montana.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Establish a committee to explore training coordination options (e.g., hiring a training coordinator or developing a regional coordination system) and submit these options to the Task Force for discussion.	CCDBG Planning Task Force	Quarterly meetings
2. Review and study training coordination options for feasibility, cost and effectiveness.	CCDBG Planning Task Force	Quarterly meetings

Objective 6: Implement a Quality Care Campaign, as approved by the Department.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Establish a Quality Care Campaign committee to: (a) define quality as it pertains to child care; (b) explore target groups, (c) explore various media possibilities and costs; (d) establish project timelines and evaluation outcomes; and (e) prepare proposal for CCDBG Planning Task Force review and approval.	CCDBG Planning Task Force	4/95
2. Finalize recommendations.	CCDBG Planning Task Force, Day Care Program Officers and QC Campaign contractor(s)	5/95 - 8/95
3. Submit final recommendations to the Department Management Team.	Day Care Program Officers	9/95
4. Implement the project, if approved.	Day Care Program Officers, CCDBG Planning Task Force	1/96
5. Conduct project evaluation, if implemented.	Day Care Program Officers, CCDBG Planning Task Force	Quarterly after implementation

Objective 7: Assess the feasibility of establishing a loan program for providers to assist them with start-up and expansion costs.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Establish committee of the CCDBG Planning Task Force to: a. Study feasibility of funding small, short-term non-interest bearing loans to day care providers. b. Establish eligibility criteria. c. Establish other criteria as necessary to implement this program. d. Explore possible loan administration-and-collection processes.	CCDBG Planning Task Force	4/95
2. Finalize recommendations.	CCDBG Planning Task Force, Day Care Program Officers and QC Campaign contractor(s)	5/95 - 8/95
3. Submit final recommendations to the Department Management Team.	Day Care Program Officers	9/95
4. Implement the project, if approved.	CCDBG Planning Task Force, Day Care Program Officers	1/96
5. Conduct project evaluation, if implemented.	CCDBG Planning Task Force, Day Care Program Officers and R&Rs	Quarterly after implementation

(b) AT-RISK CHILD CARE (ARCC) PROGRAM

GOAL: This program provides child day care assistance for low-income families who are employed and are at risk of needing public assistance (AFDC, Aid to Families with Dependent Children). Being "at risk" in the Title IV-A ARCC program does not require a family to be at-risk for abuse and/or neglect.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: The Department will provide day care services to low-income working families on a sliding fee scale, co-payment basis.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
Continue the established service priority target group for ARCC as families who have lost eligibility for Transitional Child Day Care in the last 12 months and whose income is 34% of the State Median Income (the first step of the Montana Sliding Fee Scale co-payment chart used by all state agencies paying for day care services).	Resource and Referral Agencies	On-going

Objective 2: Provide funding to Child Care Resource and Referral agencies to determine parents' eligibility for ARCC services, recruit and train additional providers to meet the demand for services, assist parents in locating appropriate care, and other R&R day care responsibilities.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Contract with the R&R agencies with funds from the ARCC program for the administration activities required to serve ARCC-eligible families.	Day Care Program Officers	Annually

(c) DEPENDENT CARE GRANT CHILD CARE SERVICES

GOAL: The federal Dependent Care Grant gives funding to states to support activities related to dependent care resource and referral systems and activities related to before- and after-school school-age child care services.

Objective 1: Award, administer and monitor day care providers grants to expand and improve day care services to school-age children.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Utilize a Request For Proposal (RFP) method to award contracts to day care providers interested in improving and expanding day care services to school-aged children.	Day Care Program Officers	10/1/95 and annually
2. Monitor use of the School Aged Child Care (SACC) day care provider funding through necessary visits and quarterly reporting.	Day Care Program Officers	Reports quarterly and at fiscal year-end; visits as needed

Objective 2: Award, administer and monitor funds to Child Care Resource and Referral (R&R) Agencies through grants to recruit and train local child care providers.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
Award grants to R&Rs for: conducting needs assessments; developing resources; establishing lists of day care providers; conducting employer outreach; and conducting necessary trainings.	Resource and Referral Agencies; Day Care Program Officers	10/1/95 and annually

(d) CHILD CARE RESOURCE AND REFERRAL (R&R) SERVICES

GOAL: Promote the availability of quality child care for all Montana families. The goal regarding Resource and Referral agencies is to continue funding so that R&Rs, under contract with the State of Montana, may fulfill the following five objectives:

Objective 1: Assist parents to locate affordable, quality child care.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Assist parents in locating day care by giving appropriate referrals to day care providers.	R&R agency and Day Care Program Officers	On-going
2. Use the CareFinder software program to assist in referral activities.	R&R agency and Day Care Program Officers	On-going
3. Work with families to identify quality care by use of a quality care checklist and by one-on-one consultation with parents.	R&R agency	On-going

4. Advise parents concerning day care programs which assist with child care costs.	R&R agency and Day Care Program Officers	On-going
5. Work with day care providers to obtain information concerning openings.	R&R agency, day care providers	On-going

Objective 2: Promote public/private partnerships to increase the availability and quality of child day care.

ACTION STEPS TO BE TAKEN	PERSON RESPONSIBLE	COMPLETION DATE
1. Conduct employer outreach activities.	R&R agency, R&R Network Coordinators	On-going
2. Continue to educate the public on the Earned Income Tax Credit and other child care tax credits.	R&R agency, R&R Network Coordinators, Central Office Day Care Program Officers	On-going

Objective 3: Continue management of state-paid day care programs by R&Rs, including management of the child care services payment process.

ACTIONS STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Continue to determine eligibility for the sliding fee scale services under the Child Care and Development Block Grant (CCDBG) and the At-Risk Child Care (ARCC) programs.	R&R Agency, Day Care Program Officers	On-going

2. Continue to certify families for all forms of state-paid day care.	R&R Agency, Day Care Program Officers, JOBS Operators	On-going
3. Continue to manage the payment system for the state-paid child care programs.	R&R Agency, Day Care Program Officers and BDM Staff	Begins 5/1/95; then on-going.
4. Continue to coordinate with JOBS program operators and other training programs to ensure that state-paid participants receive appropriate child care services.	R&R Agency, the Department's Central Office Day Care Program Officers, JOBS Operators	On-going

Objective 4: Assist in the development and promotion of policy initiatives which expand and maintain the supply of quality child care.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Provide representatives for the various task forces involved in child care issues: CCDBG task force, Governor's Child Care Advisory Council (GCCAC), Families Achieving Independence in Montana (FAIM) Task Force, MSU Early Childhood Collaboration Project, Crisis Care Project advisory council, the Partnership to Strengthen Families Project, Part H Early Intervention Services Advisory Council, Child and Family Services Standing Committee, Licensing Standing Committee.	R&R agencies, R&R Network Coordinators, Central Office Day Care Program Officers	On-going

2. Coordinate on the local level to educate consumers about state-level policy decisions.	R&R Agencies, R&R Network Coordinators, Central Office program staff and local FRS staff	On-going
3. Meet with all R&R's and the R&R Network quarterly to inform and process tasks as they apply to the work of the Child Care R&R Network.	R&R Agencies, R&R Network Coordinator, Central Office Day Care Program Officers	Quarterly and as needed.

Objective 5: Continue to offer day care provider education and training as needed in each community.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Offer Day Care Orientation training for new day care providers.	R&R agencies, local licensing staff and Central Office Day Care Program Officers	On-going
2. Promote continuing education for experienced day care providers through skill-development workshops.	R&R agencies, local licensing staff and Central Office program staff	On-going
3. Offer day care providers technical assistance via phone communications or on-site training.	R&R agencies, local licensing staff and Central Office program staff	On-going

4. Coordinate training activities with other community provider organizations.	R&R agencies, CACFP programs, Montana AEYC, MCCA and other advocacy groups	On-going
5. Facilitate access to day care resource lending libraries currently housed at R&Rs.	R&R agency and Central Office staff	On-going

(e) CHILD DAY CARE LICENSING

GOAL: To expand the quality and accessibility of child day care programs by supporting day care licensing staff through funding, appropriate training and needed consultation.

Objective 1: To support day care licensing staff through funding, appropriate training and necessary consultation.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Fund the current number of FTE Day Care licensing workers.	Day Care Program Officers	On-going
2. Update the Department's day care licensing policy section of the Licensing Manual.	Day Care Program Officers, Licensing Officer, and the Licensing Standing Committee	8/95 and as needed
3. Complete basic training and policy and administrative rule training for all day care FRS licensing workers.	Day Care Program Officers, Training Officer and the Children's Services Licensing Officer	5/95 - 3/30/96

4. Initiate a Get-Well Child Care program for children with illnesses that keep them from attending regular day care programs.	Day Care Program Officers, Get Well Care Task Force	4/30/96
5. Complete the legislatively-mandated annual 20% sample inspection of day care family and group homes and prepare a report and recommendations regarding those findings.	Local day care FRS, Day Care Program Officers	10/95 and annually
6. Continue the review and implementation of changes in the Administrative Rules of Montana for day care, in accordance with the CCDBG study of day care rules.	Day Care Program Officers, Legal Unit, CCDBG Planning Task Force	10/96 and as needed to reflect changes in law and policy
7. Provide continuing and on-going consultation and training to day care FRS field staff.	Day Care Program Officers, Licensing Officer, and Legal Unit	On-going

(f) GOVERNOR'S CHILD CARE ADVISORY COUNCIL

GOAL: The goal of the Council, for which the Department provides staff support, is to advise the Department on all child day care matters. The following objectives are excerpted from the Council's state plan for child day care.

Objective 1: Ensure enforcement of current registration and licensing requirements.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Study judicial issues related to enforcement of day care facility violations and formulate recommendations	Council, Day Care Program Officers, Legal Unit	9/96

2. Develop and implement minimum standards for Drop-In Care and Pre-School facilities consistent with current standards for other child care programs.	Council, Licensing Officer, Day Care Program Officers, Legal Unit	9/96
3. Implement recommendations resulting from the Regulatory Review of Montana day care programs, if feasible.	Day Care Program Officers and the Legal Unit	10/96

Objective 2: Implement Council's state plan recommendations concerning continuous recruitment, training, and retention of day care providers.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Promote the use of inexpensive or free training available through community and civic organizations. The Council should take an active role by formally communicating with various organizations.	Council members, Day Care Program Officers	On-going
2. Provide recognition of individuals who have appropriate training by providing a license/certification/accreditation to the individual.	Day Care Program Officers, Training Committee of the CCDBG Planning Task Force	By October of each funding year.
3. Coordinate a child care training program with Child Care Resource and Referral programs, if feasible.	Council members, Day Care Program Officers, CCDBG Planning Task Force	On-going

Objective 3: Support additional child day care needs as contained in the Governor's Child Care Advisory Council state day care plan.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Support continuation of a state day care reimbursement rate consistent with the federal regulations which mandate the 75th percentile of the Local Market Rate.	The Department, day care advocates.	Approved for the 1996-1997 biennium. Needs approval every two years.
2. Prepare a proposal and justification/rationale for the 1997 legislative session and the Governor's Executive Planning Process (EPP) to establish a fee structure for programs seeking to be licensed or registered as a means of offsetting costs of provider training.	Council members, Day Care Program Officers, day care advocates	5/96, in accord with the Governor's EPP process timelines.

A-5: CHILD ABUSE AND NEGLECT (CA/N) FEDERAL GRANTS

GOAL: To fund activities to prevent or treat child abuse and neglect and to assist in responding to reports of medically fragile infants.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Provide family preservation and support training to all Family Services staff.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Identify training needs of CPS staff related to family preservation/support.	Training committee	2/95
2. Identify training needs of other Family Services staff and foster parents related to family preservation/support.	Training committee	6/95

3. Provide training based upon identified needs to staff.	Training committee	4/95-9/97

Objective 2: Provide core training to Department protective services social workers and foster parents each year.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Provide training to two to three groups of protective services social workers (at least 40).	Training committee, training officer	9/96 - 9/97
2. Provide MAPP training to at least 300 foster and adoptive parents.	Family resource specialists, foster and adoptive parents	9/96 - 9/97

Objective 3: Continue the current level of funding for the Montana child abuse hotline, which will be expected to answer at least 600 calls per year.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Negotiate and execute an annual contract with the Ask-a-Nurse program in Billings.	Central Office program officer	6/96, 6/97

Objective 4: Train 100 staff each year in the handling of "Baby Doe" cases (medically fragile infants).

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Prepare and present at least annual training on "Baby Doe" for social workers and supervisors.	Training committee, training officer	9/96, 9/97

A-6: CHILDREN'S TRUST FUND (CTF)

CTF's mission is to raise and disburse funds that will be used to reduce the incidence of child abuse and neglect through the development of child abuse and neglect prevention programs of various types in communities across Montana. The Children's Trust Fund will take the lead in eliminating the problem of child abuse and neglect.

GOAL: Fund innovative prevention programs, public awareness, and education.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Pursue Montana CTF eligibility for the increased amount of federal Community-Based Family Resource Program (CBFRP) funds.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Participate in the development of the Five-Year Family Support and Preservation planning efforts and ensure the plan meets CBFRP requirements.	CTF contractor, board member	6/30/95
2. Complete the CBFRP grant application.	Program Officer	6/30/95

Objective 2: Increase the amount of money generated for the CTF state-wide by pursuing more private donations.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Develop new CTF pamphlets and posters.	CTF Board, Program Officer	12/31/95
2. With the other two income tax check-off organizations, distribute materials to tax preparers.	CTF Board, Program Officer	1/31/96

Objective 3: Increase public awareness of the existence of the CTF grants program.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
Develop new CTF pamphlets and posters.	CTF Board, Program Officer	12/31/95

A-7: BIG BROTHERS/BIG SISTERS

The Big Brothers and Sisters Program (BB/BS) is a community-based prevention program for at-risk children from single parent families. The ten BB/BS programs serve the following communities: Helena, Ronan, Miles City, Butte, Great Falls, Kalispell, Missoula, Bozeman, Livingston, and Billings.

GOAL: The goals of the BB/BS program are to meet the needs of at-risk children of single parents by providing:

- positive, same-sex role modeling;
- healthy adult relationships and an atmosphere for positive growth and self-esteem; and
- respite for single parents from the stresses of parenting.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Increase the number of children served statewide by 5% over FY94 total of 1,420

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Develop a BB/BS Chapter of the Montana AWARE program.	BB/BS Federation Market Committee	1/1/96
2. Develop a new recruitment TV commercial.	BB/BS Federation Market Committee	10/30/95
3. Establish a BB/BS satellite program in Boulder.	Helena BB/BS	6/30/96

4. Conduct program development training.	BB/BS Federation/ National	9/30/96
5. Conduct annual recruitment.	All BB/BS agencies	6/30/96
6. Continue school-based mentoring.	Selected BB/BS agencies	6/30/96

Objective 2: Continue to serve 54 communities in the state.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Continue to emphasize matches in contiguous areas of existing agencies.	All BB/BS agencies	On-going
2. Establish a branch office in Ennis.	Bozeman BB/BS agency	6/30/96
3. Study feasibility of Teton County expansion.	Great Falls BB/BS agency	6/30/96
4. Target new volunteers in outreach locations using recruitment materials.	All BB/BS agencies	3/31/97

Objective 3: Maintain 95% success rate of keeping children in the program in their home and enrolled in school.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Develop individual case plans to focus on child's school performance.	All BB/BS agencies	On-going
2. Refer children and families to counseling or appropriate assistance when necessary.	All BB/BS agencies - training provided by Federation and National BB/BS	On-going, 6/30/96

Objective 4: Maintain at least 95% success rate of keeping children in the program from having contact with the juvenile justice system.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Maintain close contact and referral relationships with the juvenile justice system.	All BB/BS agencies	On-going
2. Teach new skills to children during their match.	Bozeman, All BB/BS agencies, Volunteers	On-going - training developed by Federation BB/BSA
3. Increase skill levels of volunteers by training and consultation.	All BB/BS agencies	On-going

Objective 5: Achieve a success rate of 95% in helping youth, aged 13 to 18 enrolled in the program avoid pregnancy.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Provide a positive role model for youth at risk of teen pregnancy.	All BB/BS agencies	On-going
2. Maintain adequate referral sources for sexual education and information.	All BB/BS agencies	On-going
3. Implement pre-match and post-match self-esteem testing to identify youth at risk.	BB/BS Federation and BB/BSA	1/30/96

A-8: BUILDING SKILLS FOR ADULTHOOD: INDEPENDENT LIVING SERVICES

GOAL: This federally-funded Independent Living Program, now called the Building Skills for Adulthood Program, provides financial assistance and supportive services to youth 16 years or older who are preparing for discharge from foster care. The goal of this program is to assist eligible youth in attaining those attitudes, values, skills and experiences necessary for living independently and being self-sufficient.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Establish baseline data on 15 life skills for each youth in the program.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Contract for services with the University of Montana each year of the five year period	U of M Psychology Department, Program Manager	6/30 of each year
2. Conduct interview assessments with each youth utilizing the Daniel Memorial assessment.	U of M Psychology Department	6/30 of each year
3. Score assessments using compatible software.	U of M Psychology Department	6/30 of each year

Objective 2: Develop comprehensive transitional living plans for each youth in the program.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Use the Daniel Memorial Institute software program designed for this purpose.	U of M Psychology Department	June 30 of each year
2. Send copies of the assessments to case workers to be attached to case plans.	U of M Psychology Department	On-going, as the assessments are completed
3. Train caseworkers, supervisors and mentors on how to work with the transitional living plans.	Program Manager and Regional representatives	Initial training July 1995 and enhanced each subsequent year

Objective 3: Develop a state-wide pool of at least 200 registered mentors by the end of the five year period, at least 15% of whom are Native Americans.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Recruit volunteers for the program.	U of M Psychology Department	On-going
2. Provide cash stipends for registered mentors.	Program Manager	On-going
3. Collaborate with Tribal Colleges to establish mentor programs.	Program Manager	On-going

Objective 4: Increase the capacity of mentors to assist youth in their transition to independent living.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Offer a comprehensive 24-hour training module to all potential mentors.	U of M Psychology Department	On-going
2. Offer stipends to those who attend training.	U of M Psychology Department	On-going
3. Send monthly newsletters to registered mentors.	U of M Psychology Department	On-going
4. Provide resource materials to mentors.	U of M Psychology Department	On-going

Objective 5: Train at least 200 youth in the "Changing Directions" course during the five year period.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Develop a statewide pool of 20 trainers certified in the Pacific Institute to facilitate the course.	Program Manager	On-going
2. Train at least five new trainers each year starting year two.	Program Manager	On-going, for four years
3. Make the course available to all youth in the program.	Program Manager	On-going

Objective 6: Increase the capacity of Department staff, juvenile probation officers, foster care providers and other youth serving persons to deal with the issues of transitioning youth.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Update policy and procedures annually.	Program Manager	On-going
2. Include this information in the CAPS system.	Program Manager and staff	On-going after second year
3. Require and provide regional training.	Program Manager and Training Officer	On-going after first year
4. Build and enhance collaborative networks.	Program Officer	On-going
5. Provide training at the annual Montana State Foster and Adoptive Parent Association conference.	Program Officer	Annually

Objective 7: Assure that each youth in the program has a comprehensive health history upon case closure.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Train caseworkers, providers and mentors on the importance of health history.	Program Manager	On-going
2. Provide "Medical Life Line" documents for this purpose.	Program Manager	On-going
3. Capture data from the CAPS system for this purpose.	Program Manager and CAPS staff	On-going
4. Assure that the case plan identifies the party responsible.	Program Manager and Supervisors	On-going

Objective 8: Increase the level of youth involvement in the program.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Send the skills assessment scores and transitional living plan to the youth.	U of M Psychology Department	On-going
2. Encourage the youth to meet with case workers to identify priorities on the plan.	U of M Psychology Department and Program Manager	On-going
3. Conduct periodic youth focus groups to receive input on program activities.	U of M Psychology Department and Program Manager	On-going
4. Develop one youth advisory council for each of the five regions.	Program Manager and Regional Representative Staff	9/30/98

Objective 9: Develop a pilot project for supervised living arrangements for transitioning youth.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Identify successful projects in other states.	Program Manager	1/96
2. Develop policies.	Program Manager	4/96
3. Establish a pilot site.	Program Manager	6/96
4. Train case workers in the site areas.	Program Manager	1/97
5. Evaluate the effectiveness of the pilot.	U of M	9/99
6. Modify, expand, or abandon the pilot project based on results of the evaluation.	U of M, Program Manager and Regional Reps.	9/99

Objective 10: Develop a pilot work/mentor project for transitioning youth.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Enter into an agreement with the Montana Conservation Corps.	Program Manager	1/96
2. Train corps members chosen for this project in the 24-hour intensive mentor training module.	U of M Psychology Department	4/96
3. Identify the project pilot site.	Program Manager and Regional Reps.	6/96

4. Identify the work project.	Program Manager and Regional Representatives	7/96
5. Evaluate the effectiveness of the pilot.	U of M Psychology Department	7/97
6. Modify, expand, or abandon the pilot project based on results of the evaluation.	Program Manager and Regional reps.	7/97

Objective 11: Increase the number of resource materials pertinent to transitioning youth.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Expand the existing Resource Library.	Program Manager	On-going
2. Periodically update resource listing .	Program Manager	On-going
3. Develop a "Youth Yellow Pages" to assist transitioning youth in utilizing available community resources.	U of M Psychology Department and Program Manager	12/95
4. Develop and maintain limited regional libraries consisting of independent living curricula.	Program Manager and Regional Reps.	1/96

Objective 12: Include birth family in the youth's transition whenever possible.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Add birth family queries to the initial questionnaire with youth.	U of M Psychology Department	8/95

2. Conduct outreach to birth families.	U of M Psychology Department and Program Manager	On-going
3. Conduct at least five focus groups each year with birth parents and/or extended family.	U of M Psychology Department	On-going

A-9: MONTANA REFUGEE RESETTLEMENT PROGRAM

The Montana Refugee Resettlement Program managed by the Department is part of a national/state program to assist refugees to resettle in each state. Participating states, including Montana, receive federal funds to: (1) provide social services to refugees to assist them to gain self-sufficiency and (2) provide direct cash and medical payments for a limited time in order to make their transition easier. In addition, federal discretionary grants money is sometimes available for special projects. Montana's Refugee Resettlement Program Coordinator is a Department staff person. Social services under the program are provided by two local refugee Mutual Assistance Associations under contract with the Department -- one in Billings, the other in Missoula. The Refugee Cash and Medical Assistance payments portion of the program is also managed by the Department.

GOAL: Specific goals are to:

- provide services for effective resettlement of refugees in Montana communities;
- assist refugees to become self-sufficient as quickly as possible; and
- provide on-going social services to refugee families who need the services.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Resettle all refugees who are brought to the state by the Volunteer Agencies (VOLAGs) during the next five years.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Receive the names of newly-arrived refugees from VOLAGs.	State Refugee Coordinator	On-going
2. Refer refugees to the appropriate refugee-serving agency.	State Refugee Coordinator	On-going
3. Leverage funding sources to provide services to refugees.	State Refugee Coordinator	On-going

Objective 2: Prepare additional locations that have not previously received refugees to resettle refugees and offer services to the refugees.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Identify three additional refugee resettlement sites.	State Refugee Coordinator.	9/96
2. Choose Refugee Resettlement Specialist (RRS) in each community.	Service providers and community people	1/97
3. Choose a local team of refugee resettlement planners.	State Refugee Coordinator, RRS, community people	3/97

4. Train local Refugee Resettlement Planners to organize community services necessary for successful resettlement.	State Refugee Coordinator, RRS	Initially by 8/97, then on-going as necessary

Objective 3: Minimize the number of refugees who become dependent upon welfare, and strive to ensure that all refugees become self-sufficient within 18 months of placement through the contracted employment training and placement programs, the Refugee Assistance Corporation (RAC) and Montana Association for Refugee Services (MARS)

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Register all new refugees with the local Job Service.	RAC and MARS	On-going
2. Provide necessary job-readiness training to all refugees who are able to work.	RAC and MARS	On-going
3. Provide job placement and follow-up services to all refugees who are able to work	RAC and MARS	Ongoing

IX-B: PROTECTIVE SERVICES

1. CHILD PROTECTIVE SERVICES (CPS) INVESTIGATIONS	Provide a balanced service system to meet the needs of children who are abused or neglected or are at-risk of abuse or neglect.
2. CHILD PROTECTIVE SERVICES (CPS) DAY CARE	Provide child protective services (CPS) day care to families to prevent out-of-home placement, whenever warranted.
3. FAMILY-BASED SERVICES AND OTHER IN-HOME SERVICES	1. Strengthen families to prevent an out-of-home placements of their child(ren) or to reunify families following an out-of-home placement of their child(ren); and 2. Prevent the removal of the child(ren) from their homes in 80% of the families served within six months following the provision of FBS services.
4. DOMESTIC VIOLENCE SERVICES	1. Assist victims of family violence and their families in securing emergency food and shelter and counseling; and 2. Provide domestic violence program participants with advocacy, education, assistance with legal, financial, and other crises; and referral to helping agencies.
5. INTERSTATE COMPACT ON THE PLACEMENT OF CHILDREN	Maintain orderly procedures for the interstate placement of children and ensure planning and financial responsibility of the sending state.
6. CHILDREN'S JUSTICE ACT	Assure that all aspects of the investigation and prosecution of child abuse cases are done in an effective manner which limits additional trauma to the child victim.
7. SERVICES TO INDIAN CHILDREN AND FAMILIES	1. Ensure Montana compliance with the Indian Child Welfare Act; 2. Ensure that the department provides services to Indian families in a culturally sensitive manner; 3. Develop an on-going relationship with tribal governments and the BIA; and 4. Increase and improve services to meet the safety and emotional needs of Indian children residing in foster care on the reservations.
8. FAMILIES FOR KIDS PROJECT	Provide each child with a life-long connection whenever possible.

9. KINSHIP CARE	1. Protect children and diminish the trauma that placement induces in children for whom out-of-home placement has been determined necessary; 2. Ensure that extended family or others with a close meaningful relationship with the child and family are the first option considered for out-of-home placement of a child; and 3. Involve the child's family in the decision-making and choice of the out-of-home care provider.
10. SHELTER CARE AND RECEIVING HOME SERVICES	Provide short-term placement for youth in need of out-of-home care.
11. FAMILY FOSTER CARE SERVICES	1. Protect and care for children who are removed from or without the care and supervision of their parents or guardians; 2. Collaborate in a partnership with foster parents; and 3. Provide interface with other Department initiatives.
12. YOUTH GROUP HOME FOSTER CARE SERVICES	Provide safe and structured environments to youth in need of community-based services.
13. ADOPTION SERVICES	Provide each child with a permanent, legal family whenever possible.
14. SUBSIDIZED ADOPTION SERVICES	Encourage and promote the adoption of children who have special needs.
15. THERAPEUTIC FOSTER CARE SERVICES	1. Provide therapeutic services to children in a family environment when appropriate; and 2. Prevent placement in more restrictive environments.
16. THERAPEUTIC YOUTH GROUP HOME CARE SERVICES	Provide treatment to children and youth who would otherwise be served in more restrictive levels of care.
17. RESIDENTIAL TREATMENT SERVICES	Provide intensive in-patient clinical interventions.

B-1: CHILD PROTECTIVE SERVICES INVESTIGATIONS

Protective services are provided to children who are maltreated by persons responsible for their welfare. Protective services focus on the protection of children by identifying the strengths and needs of families while promoting family stabilization through the resolution of those identified needs. When a social worker substantiates a referral, the worker will develop a plan for the immediate safety of the child(ren). Whenever possible this plan will be developed in collaboration with the family. Continued services may be necessary if the child remains at-risk of child abuse or neglect. If the family is unable or unwilling to rectify the circumstances which resulted in the maltreatment court action may be necessary.

GOAL: Provide a balanced service system to meet the needs of children who are abused or neglected or are at-risk of abuse or neglect. The system must be culturally sensitive, family-centered, comprehensive, flexible and community-based.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Protect children from maltreatment.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Provide intake services which consist of: (a) receiving the referral; (b) making collateral contacts; (c) exploring the appropriateness of the referral; and (d) documenting the determination in the case record.	Field Staff	On-going

2. Conduct an initial assessment which consists of: (a) contact with the child and family; (b) subsequent assessment visits; (c) evaluating damage to the child; (d) potential continued risk to the child; (e) evaluating family indicators for abuse/neglect; (f) opening or continuing the case; (g) determining necessity of court action; (h) providing services as identified; (i) providing feedback to appropriate persons; and (j) documenting the case record.	Field Staff	On-going
3. Assess the family to identify strengths and areas for improvement in family functioning.	Field Staff	On-going
4. Develop the case plan in collaboration with the family to: (a) determine resources needed and availability; (b) specify the changes and outcomes needed to assure the child's continued safety; (c) decide what services will be given to whom, by whom, how often and how long; (d) establish review dates; and (e) finalize the case plan.	Field Staff	On-going
5. Provide services to the family as identified in the case plan.	Field Staff	On-going
6. Monitor and evaluate family progress on the case plan through: (a) contact with service providers and relevant parties; and (b) meetings/contact with family.	Field Staff	On-going

7. Assess whether to close or continue case through: (a) evaluation of goal attainment; (b) analyze family stability; (c) examination of need for continuing services; and (d) document case record.	Field Staff	On-going
8. Provide 24-hour emergency services.	Field Staff	On-going
9. Provide out-of-home placement reviews as required.	Field Staff	On-going

Objective 2: Preserve/strengthen the family whenever possible.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Integrate family preservation and support practices into agency policy and case management.	Central Office Staff	On-going
2. Train staff in family preservation and support practices.	Field Supervisors, Training Program Officer, CPS Program Officer, Training Standing Committee	On-going
3. Integrate "family-centered" practice into agency policy.	Management Team, Central Office Staff, Field Staff	On-going

4. Train staff in "family-centered" practice.	Field Supervisors, Training Program Officer, CPS Program Officer, Training Standing Committee	On-going
5. Provide case management services which utilize "family-centered" practice.	Field Supervisors, Training Program Officer, CPS Program Officer	On-going

Objective 3: Assure that Department services and policy are culturally relevant and that Department staff are culturally sensitive.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Emphasize cultural relevance in agency policy.	Management Team, Central Office Staff, Field Staff	On-going
2. Emphasize cultural sensitivity with agency staff.	Management Team, Central Office Staff, Field Staff	On-going
3. Train supervisors and social workers in necessary knowledge and skills to relate appropriately to cultural groupings.	Management Team, Training Program Officer, CPS Program Officer, Training Standing Committee	On-going

Objective 4: Begin concurrent planning when a case is opened or at time of initial out-of-home placement.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Develop a treatment plan with the family with the goal of maintaining or achieving family unity.	Field Staff	On-going
2. Develop a concurrent plan to achieve stability for the child if the family unity treatment plan is not successful.	Field Staff	On-going

Objective 5: Involve communities in child protection.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Identify family and community resources and responses when a referral is made and when a case is opened.	Child Protection Teams, Foster Care Review Committees, Citizen Review Boards, Decision-makers, Community-at-large	On-going
2. Maintain Child Protection Teams.	Field Staff, CPS Program Officer	On-going
3. Utilize multi-disciplinary planning as appropriate.	Regional Staff	On-going

4. Maintain seven local Family Services Advisory Councils.	Director, Field Services Division Administrator, Regional Administrators	On-going
5. Maintain the state Family Services Advisory Council.	Director	On-going
6. Maintain the Indian Advisory Council.	Director	On-going

B-2: CHILD PROTECTIVE SERVICES (CPS) DAY CARE

GOAL: Provide child protective services (CPS) day care to families to prevent out-of-home placement, whenever warranted. CPS day care is funded entirely by state general fund dollars. This service is provided when children have been found to be abused or neglected or are at risk of being abused or neglected.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Prevent the need for further, more serious intervention such as out-of-home placement

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Provide CPS day care support rather than foster care, when appropriate.	Field Staff	On-going, as need is determined by family assessment
2. Assist the parents to identify their stressors.	Field Staff	As needed
3. Present alternatives to parents such as parenting classes, social work counseling.	Field Staff	As needed
4. Provide an opportunity for parents to observe and practice model parenting skills in a supervised day care facility.	Field Staff	As needed

5. Provide respite time to the parents through day care.	Field Staff	As needed
6. Purchase day care services from licensed/registered facilities for the children/families.	Field Staff	As needed, given availability of funding
7. Monitor care of children in day care facilities through periodic visits.	Field Staff	As needed, in accord with case plan
8. Monitor children's behavior changes and family interaction through periodic visits and supervised settings.	Field Staff	As needed
9. Visit with the children in the safe environment of the day care facility.	Field Staff	As needed

Objective 3: Assure that registered and licensed day care facilities provide a safe environment.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Establish licensing/registration requirements (and other standards) for day care providers.	Licensing and program staff, with the Licensing Standing Committee	On-going
2. Implement licensing and registration procedures.	Licensing and program staff	On-going
3. Monitor provider compliance through visits, inspections in accord with established policy.	Day Care Program Officers and day care licensing staff	On-going

Objective 3: Secure adequate funding for CPS Day Care.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Include the appropriate requests for CPS day care state general funds in the Executive Planning Process (EPP) budget requests for legislative consideration.	Day Care Program Officers and Department fiscal officers	In accord with the EPP timelines
2. Use the available state general fund dollars as needed matching funds to draw down the IV-A funding for day care services for AFDC-eligible CPS families.	Day Care Program Officers and Department fiscal officers	As needed

B-3: FAMILY-BASED SERVICES AND OTHER IN-HOME SERVICES

Family-Based Services (FBS) provides short-term, intensive therapeutic services to families in their own homes when the families are at risk of having their children removed due to protective service issues, the serious emotional disturbance of their child(ren), or foster and/or adoptive placement breakdown. Family-Based Services also serves families who will be reunified with their child(ren) following the child(ren)'s out-of-home placement. The Department purchases Family-Based Services through contracts with ten not-for-profit agencies selected through the Request for Proposal process. In FY95 the Department has contracted for Family Based Services to be provided to 263 families in 28 counties. This program is funded entirely by state general fund dollars.

GOAL: Strengthen families by preventing out-of-home placements or reunify families following an out-of-home placement; prevent the removal of the child(ren) from their homes in 80% of the families served within six months following the provision of FBS services.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Contract for ten Family-Based Services projects providing services in 35 counties.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Complete the annual contracting cycle with FBS providers.	Central Office: Program Management Division and Management Support Services Division Staff	6/30/95 and yearly
2. Monitor FBS contracts.	Central Office and Regional Staff	On-going

Objective 2: Expand Family-Based Services as funding allows.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Identify state general fund dollars to support expansion of FBS.	Department Regional and Central Office staff	On-going

B-4: DOMESTIC VIOLENCE SERVICES

The Domestic Violence Program provides funding for community-based projects which give victims of spouse abuse/domestic violence moral support, assist them with emergency housing, provide them with information about domestic violence laws and their legal rights, and make referrals to other agencies which can be contacted for additional assistance. The program presently has contracts with 20 service providers across the state. Contracts are awarded competitively to private not-for-profit agencies. The Department works closely with the Montana Coalition Against Domestic Violence (MCADV).

GOALS:

Assist victims of family violence and their families in securing:

- emergency food and shelter; and
- counseling; and

Provide program participants with:

- advocacy
- education
- assistance with legal, financial, and other crises; and
- referral to helping agencies.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Contract with 20 domestic violence service providers across the state.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Complete the annual contracting cycle with service providers.	Domestic Violence (DV) Program Officer	6/96
2. Monitor domestic violence contracts.	DV Program Officer	6/96

Objective 2: Collaborate with the Montana Coalition Against Domestic Violence (MCADV).

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Seek funding to employ or to contract a Domestic Violence Specialist (DVS) to be based in Helena.	DV Program Officer, MCADV	6/96
2. Develop a written plan for effective domestic violence intervention and advocacy for families with children.	DVS, DV Program Officer, MCADV	6/96

3. Form a domestic violence working team in conjunction with domestic violence programs.	DVS, DV Program Officer, Field Staff, MCADV	6/96
4. Determine the best intervention strategies for particular programs and communities and the special needs of communities and service areas.	DVS, DV Team, DV Program Officer, MCADV	7/97
5. Implement the identified strategies.	DVS, DV Program Office, DV Team, MCADV	1/98

Objective 3: Increase the knowledge of community professionals in the dynamics of domestic violence.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Incorporate domestic violence training into the training curriculum for new CPS workers.	Training Program Officer, MCADV Coordinator	On-going
2. Conduct one in-service training session for current CPS workers on some aspect of domestic violence.	MCADV Coordinator, Training Program Officer,Training Standing Committee, DV Program Officer	Annually

3. Conduct one in-service training session for current domestic violence workers on an aspect of child abuse and neglect.	CPS Program Officer, MCADV Coordinator, Training Program Officer,Training Standing Committee, DV Program Officer	Annually

B-5: INTERSTATE COMPACT ON THE PLACEMENT OF CHILDREN

GOAL: Maintain orderly procedures for the interstate placement of children and ensure planning and financial responsibility of the sending state.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Send quarterly follow-up notices about over-due requests to local workers and other states.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Print lists of cases requiring follow-up.	Compact Administrator	Quarterly
2. Review cases on list for needed materials.	Compact, Deputy Administrator	Quarterly
3. Send follow-up notices to local offices and other states.	Compact, Deputy Administrator	Quarterly

Objective 2: Maintain current knowledge about ICPC procedures and review ICPC policies and ARM sections every year.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Attend annual AAICPC meeting.	Compact, Deputy Administrator	5/96, 5/97
2. Review Secretariat opinions and recent court decisions regarding ICPC.	Compact, Deputy Administrator	When issued
3. Review and revise, if necessary, ICPC policy.	Compact, Deputy Administrator	Annually
4. Review and revise, if necessary, ICPC administrative rules section.	Compact, Deputy Administrator	Annually

Objective 3: Submit quarterly statistics to the national Secretariat.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Print and mail quarterly report.	Compact Administrator	11/15/95, 1/15/96, 4/15/96, 7/15/96, 11/15/96, 1/15/97, 4/15/96, 7/25/97

B-6: CHILDREN'S JUSTICE ACT

The Department receives Children's Justice Act funds under a non-competitive federal grant program to improve each state's handling of child abuse and neglect cases, particularly cases of child sexual abuse.

GOAL: Assure that all aspects of the investigation and prosecution of child abuse cases are done in an effective manner which limits additional trauma to the child victim.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Train Montana judges and county attorneys.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Provide judges with training on innovative treatment of children as witnesses.	Supreme Court Administrative Officer, U.S. Attorney's Office(Montana) Victim Witness Coordinator, CPS Program Officer	10/4/95
2. Provide statewide training for Children's Protective Multidisciplinary Teams, Citizen Review Boards, Foster Care Review Committees, Youth Placement Committee members and Tribal Social Services	Training Officer, CPS Program Officer, ICWA Specialist, Law Enforcement Academy	8/16,17,18/95

Objective 2: Maintain an active Children's Justice Act Task Force to assess state laws and procedures dealing with child abuse and neglect cases.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Meet on a scheduled basis.	Task Force, CPS Program Officer	On-going
2. Identify needed legislation in the prosecution of child abuse and neglect cases.	Task Force Members	On-going

Objective 3: Establish and maintain child mortality review teams on a voluntary basis.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Coordinate with the Coroners' Association regarding Child Mortality Review legislation.	Task Force Members	12/95
2. Support the Missoula County pilot Child Mortality Review Team (CMRT).	Missoula County Health Dept., Pilot Project Coordinator, CPS Program Officer	On-going
3. Establish CMRT's as requested.	ICWA Specialist, Pilot Project Coordinator, CPS Program Officer	On-going
4. Identify data elements and reporting procedures for Child Mortality Review Teams.	Pilot Project Coordinator,Task Force Members	On-going

4. Identify training and funding needs for state and local Child Mortality Review Teams.	Task Force Members	12/95
5. Identify issues and recommendations addressing surviving siblings and family members.	Task Force Members	12/95
6. Develop options to be presented to the Department for referring child fatalities to other jurisdictions when a family relocates.	Task Force Members	12/95

B-7: SERVICES TO INDIAN CHILDREN AND FAMILIES

GOAL: Ensure compliance with the provisions of the Indian Child Welfare Act (ICWA). Congress enacted the Act in order to promote the stability of Indian families and tribes. The Act imposes strict procedural requirements whenever a state court proceeding involves the removal of an Indian child from his/her home. The Act was enacted pursuant to the plenary power of Congress over Indian Affairs; therefore, states must comply with the Act.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Continue policy, practice and training which incorporates the requirements of the ICWA into the provision of services to Indian children and families.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Re-examine policy on the ICWA and modify as required.	ICWA Specialist, Legal Staff	On-going
2. Provide technical consultation for field staff on the provisions and interpretation of the ICWA.	ICWA Specialist, Legal Staff	On-going
3. Continue training on the ICWA at the Montana Child Abuse and Neglect training for newly hired staff.	ICWA Specialist, Training Officer, Training Standing Committee	On-going
4. Provide staff training on the ICWA policy and policy modifications.	ICWA Specialist, Legal Staff	On-going

Objective 2: Develop those resources necessary to comply with the ICWA.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Initiate a program to recruit, license, and train Indian families residing off-reservation as foster and adoptive parents.	ICWA Specialist, Licensing Specialist, Regional staff	On-going
2. Develop and implement a kinship care program and adopt licensing standards specific to kinship care.	Licensing Program Officer, ICWA Specialist, Kinship Care Committee	7/96
3. Provide technical assistance to those reservations which request assistance in drafting tribal code provisions which establish permanency alternatives other than termination of parental rights and subsequent adoption.	ICWA Specialist, Legal Staff	On-going

GOAL: Ensure that the department provides services to Indian families in a culturally sensitive manner.

Objective : Provide training to appropriate department staff to ensure that staff is culturally aware in its provision of services to Indian families.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Incorporate a section on cultural sensitivity into the training curriculum for newly hired workers.	ICWA Specialist, Training Officer	Completed
2. Train on cultural sensitivity at the annual ICWA conference sponsored by the department.	ICWA Specialist, Training Officer	Annually
3. Include reference to cultural sensitivity in all on-going training provided to staff.	ICWA Specialist, Training Officer	On-going

4. Compile and disseminate to staff and communities materials that provide information on culturally relevant child and family services programs.	ICWA Specialist, Training Officer	On-going

GOAL: Develop an on-going relationship with tribal governments and the BIA to coordinate existing child and family programs, new activities undertaken pursuant to the Family Preservation Act, and resources/programs funded through the department and BIA. Services to Indian children and families must be provided in the context of tribe/family and with respect for tribal sovereignty.

Objective 1 : Include persons of Indian descent in departmental and interagency planning efforts aimed at improving the system of community-based, family-oriented services for Indian children and families.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Appoint a person of Indian descent to each local advisory council.	Director	When vacancy occurs on each council.
2. Recommend to the Governor that an Indian representative be appointed to the State Advisory Council.	Director	When vacancy occurs on the council.
3. Extend the Memorandum of Understanding establishing the Indian Advisory Council thereby recognizing the Council as an on-going entity.	Director	7/96
4. Continue to appoint a staff person to serve as a voting member of the Indian Advisory Council.	Director	On-going

Objective 2: Provide technical assistance and consultation to tribal social services regarding the ICWA, available services/programs, child and family issues relating to Indians, and funding streams.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Continue to assist tribes in interpreting the provisions of the ICWA.	ICWA Specialist, Legal Staff	On-going
2. Continue to provide tribal social services with technical consultation and assistance in identifying funding streams and developing programs for Indian children and families both on and off reservation.	ICWA Specialist, Department Program Officers	On-going
3. Jointly fund (with the BIA and tribes) training efforts in communities whenever possible to encourage mutual respect between participants.	Director, ICWA Specialist, Training Officer	On-going
4. Continue to participate in a partnership with the seven reservations in conjunction with the Families For Kids Project.	Director and Department staff	12/98
5. Work with tribal social services and BIA to create a comprehensive plan for delivery of services to Indian children and families which will address family preservation, reducing out-of-home placements, and permanency planning.	ICWA Specialist, Permanency Program Officer, FFK Program Officers	12/98
6. Gather information on model programs and other areas of interest and disseminate to tribal governments.	ICWA Specialist	On-going
7. Gather information regarding funding streams for programs for children and families and disseminate that information to the tribes and BIA.	ICWA Specialist	On-going

GOAL: Increase and improve services to meet the safety and emotional needs of Indian children residing on and off the reservation.

Objective 1: Continue to provide Title IV-E funding for foster care services to eligible Indian children residing on reservations who require foster care as a protective service.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Continue to contract with six reservations for Title IV-E foster care services.	ICWA Specialist, Regional Administrators, Fiscal Bureau Chief	Upon termination date of current contracts.
2. Determine whether the Fort Peck Tribe desires to enter into another agreement or contract with the department for Title IV-E foster care services.	ICWA Specialist, Eastern Regional Administrator, Fiscal Bureau Chief	12/95

Objective 2: Continue to provide Title IV-E funding and support for recruitment and training of Indian foster parents living on or near a reservation.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Negotiate Title IV-E training contracts (which include training for foster parents) with those reservations which request them.	ICWA Specialist, Training Officer, Fiscal Bureau Chief	As current contracts terminate
2. Negotiate contracts with Indian entities for the recruitment and training of Indian foster and adoptive families, upon request.	ICWA Specialist, Training Officer, Regional Administrators	On-going

Objective 3: Participate in a partnership with tribal social services to address the needs of the Indian children in the target population for the Families For Kids Project (FFK).

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Provide technical assistance to tribal social services regarding permanency issues.	ICWA Specialist, Permanency Program Officer, FFK Program Officers	On-going
2. Provide tribal social services with data regarding the Indian children in the FFK target population.	ICWA Specialist, Management Analyst, FFK Program Officers	On-going
3. Develop and implement a kinship care program and adopt licensing standards specific to kinship care.	Licensing Program Officer, ICWA Specialist, Kinship Care Committee	7/96

B-8: FAMILIES FOR KIDS PROJECT

The Department and the Montana Adoption Resource Center, Inc. received a three year $1.6 million grant from the W. K. Kellogg Foundation to fund the Families For Kids initiative. This initiative focuses on children in the context of their families and families in the context of their communities. The initiative enhances the role of parents in planning and delivering services to their children and shifts the focus from removal of children to family preservation. At the same time, "Families For Kids" promotes the need for permanent placement of children in a time frame that best meets the child's needs.

GOAL: Provide each child with a life-long connection, whenever possible.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Initiate intervention strategies that will result in permanent homes for children in a time frame that reflects the needs of the child.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Develop a rural delivery training curriculum on family preservation and permanency planning, which is culturally relevant, for all key players in the system.	MARC, Inc.; Standing Committees	1995
2. Develop the Department's capacity to provide training on family preservation, permanency planning and partnership to agencies and individuals providing services to children and families.	Department Management Team; Central Office Staff; Private Adoption Agencies; BIA/Tribal Social Services (TSS)	On-going
3. Provide intensive training focusing on family preservation for Foster Care Review Committees, Citizen Review Boards, Child Protection Teams, Youth Placement Committees and MRM Regional Teams.	Department; MARC, Inc.; BIA/TSS	On-going

4. Utilize a time-limited case plan, which focuses on family strengths and the child's need for permanence.	Central Office Staff; Field Staff; Contractors	On-going
5. Prepare children for permanent placement and families for adoption.	Family Resource Specialists; Community Social Workers; Contractors	On-going

Objective 2: Initiate timely intervention strategies to reduce the number of children in the foster care system.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Identify children in the target population, including those on the reservations.	Central Office; Field Staff	Initial 4/95 and On-going
2. Place a specific number of children from the target population in permanent homes.	Community Social Workers; Family Resource Specialists; Private Agencies; BIA/TSS	Initial 8/95 and On-going

Objective 3: Develop single coordinated assessment strategies for system change.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Clarify the role(s) and functions of child protection teams, sexual abuse teams, youth placement committees and MRM team statewide, including the reservations.	Department; Study Team; BIA/TSS; Private Agencies	1998

2. Develop a single coordinated assessment process.	Study Team; Department; BIA/TSS; Private agencies	1996
3. Develop interagency teams to coordinate family assessments.	Department; BIA/TSS; Private Agencies	1996
4. Implement alternatives to reduce the number of workers assigned to a child and initiate the use of teams statewide, including the reservations.	Department; BIA/TSS; Private Agencies	On-going

Objective 4: Reduce the number of placements experienced by children in out-of-home care.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Provide basic and specialized training to licensing staff, placement staff, foster parents and potential adoptive parents.	Central Office; Training Standing Committee; Montana Foster/Adoptive Parent Association; Private Agencies	On-going
2. Increase post-placement services to adoptive families and family foster care providers.	Department; MT Council for Families; Private Agencies	On-going

B-9: KINSHIP CARE

GOALS: Protect children and diminish the trauma that placement induces in children for whom out-of-home placement has been determined necessary; ensure that extended family or others with a close, meaningful relationship to the child and the family are the first option considered for out-of-home placement of a child; and involve the child's family in the decision-making and choice of the out-of-home care provider.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Meet the protection, developmental, cultural and permanency needs of children.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Define kinship care.	Kinship Care Committee	5/12/95
2. Identify Departmental legal, policy and practice barriers to the agency use of kinship care.	Kinship Care Committee	7/14/95
3. Amend existing family foster care licensing rules to provide greater flexibility in family assessment as it applies to kinship families.	Children's Services Program Officer, Licensing Standing Committee, Legal Unit	9/30/95
4. Identify pre-service and in-service training needs of kinship families.	Kinship Care Committee, Licensing Standing Committee, CPS Policy Committee	7/30/95
5. Amend existing licensing policy and procedure to reflect the special needs of kinship families.	Licensing Standing Committee	10/30/95

6. Identify training needs of protective service and Family Resource Specialist staff to enlist their understanding and support of the use of kinship care.	Regional Administrators and staff, Kinship Care Committee, Licensing Standing Committee, CPS Policy Committee	On-going

Objective 2: Support families so they can protect and nurture their children

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Develop rules and processes that provide eligibility for a higher rate of financial allowance as a licensed caretaker for approved kinship families.	Kinship Care Committee, Licensing Standing Committee, Legal Unit	9/30/95
2. Identify the vulnerabilities and needs of kinship families.	Kinship Care Committee, Child and Family Services Standing Committee, Regional Administrators and staff	8/30/95
3. Revise identified protective services policies to more accurately meet the identified needs of the kinship family.	Kinship Care Committee, Licensing Standing Committee, CPS Policy Committee	9/30/95

Objective 3: Maintain or rebuild parent-child relationships and help parents stay connected with their children, if not regain full-time care and custody;
Objective 4: Ensure permanency for children within their families; and
Objective 5: Minimize the loss of family and family history.

Action steps for these objectives to be developed by the Kinship Care Committee by September, 1995.

B-10: SHELTER CARE/RECEIVING HOME SERVICES

Shelter care and receiving homes provide residential services for children and youth in need of short-term out-of-home placements. Placements are usually of an emergency nature and provide a safe, structured environment in which to provide services while plans are evaluated to return the child to his/her family or to an alternative setting.

GOAL: Provide short-term placement for youth in need of out-of-home care.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Maintain statewide availability of this service.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Assure contracts are issued in a timely manner and contain language appropriate to the services provided	Residential Care Specialist, Contract Officer	On-Going
2. Assure services provided are in compliance with contract language.	Residential Care Specialist, Program Officer for Contract Monitoring	On-going

3. Support contracted providers of this service in the development and adoption of program standards.	Residential Care Specialist	6/30/97

Objective 2: Develop additional resources for this service.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Support expansion of this service as determined by local needs assessments.	Field Staff, Region Administrators, Residential Care Specialist	On-going

B-11: FAMILY FOSTER CARE

Family foster care provides for the full-time care of children in family home settings when such children have been removed from their homes because of abuse or neglect or when parents are unable to care for them.

GOAL: Protect and care for children who are removed from or without the care and supervision of their parents or guardians.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Review and update policies and procedures regarding the necessity for placement of children meeting each child's physical, mental and emotional needs in the most appropriate, least restrictive setting possible.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Update foster care section of Child and Family Services Manual as needed depending upon federal, state and departmental mandates.	Bureau Chief, Foster Care Program Officer; Child and Family Services Policy Standing Committee	1995 and On-going
2. Assess each child regarding level of care and necessary support services.	Field Staff; Field Supervisors; FCRS's; CRB's; Child Protection Teams	On-going
3. Provide each child in care with support services according to Department policy and state and federal guidelines (i.e. clothing, diaper, respite care, diet support allowances or any other documented special needs allowance. Home-Based Services, Drug and Alcohol Treatment Services, Mental Health Services, Independent Living Services and Emergency Assistance Services should also be considered.)	Field Staff	On-going

Objective 2: Provide a stable environment for children in out-of-home care.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Implement active recruitment plan for foster homes (both Indian and non-Indian).	Foster Care Program Officer; Licensing Program Officer; Child & Family Services Standing Committee; FRS Supervisor; Family Resource Specialist; ICWA Specialist	On-going.
2. Assure all foster homes meet agency standards. Note: for specifics in licensing, see Licensing Section.	Licensing Program Officer; FRS Supervisor; Family Resource Specialist	Ongoing

Objective 3: Review the placement of any child who has been in placement for a period of six months or longer, is under the supervision of the Department, and was placed by the Department or whose placement is paid for by the Department.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Review each child's placement no later than the 6-month anniversary date of child's initial placement with any subsequent follow-up reviews taking place within six months of initial review and every six months thereafter for as long as child remains in care.	Foster Care Review Committees; Citizen Review Boards; Field Staff; Field Supervisor	On-going every 6 months
2. Conduct a dispositional hearing within 18 months of the initial placement of child and subsequent dispositional reviews every 12 months thereafter.	Appropriate District Court Judge; Field Staff; and in subsequent dispositional hearings a court-approved FCRC may review	On-going every 18 months

GOAL: Collaborate in a partnership with foster parents.

Objective 1: Continue development of "MAPP/GPS" foster/adoptive parent training with continued emphasis on the idea of an effective working partnership between the Department and Foster/Adoptive Parents relating to all aspects of family foster care services. (MAPP/GPS = Model Approach to Partnership In Parenting/Group Preparation and Selection.)

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Complete two week MAPP/GPS certification training for 26 Family Resource Specialists, Community Social Workers and Foster/Adoptive Parents.	Foster Care Program Officer	7/14/95 and On-going
2. Complete three-day training ("Deciding Together") for Family Resource Specialists and Community Social Workers in the Rural MAPP/GPS model.	Foster Care Program Officer	6/2/95 and On-going

Objective 2: Enhance, reinforce and build effective communication links between the Department and Foster/Adoptive Parents.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Develop and continue to utilize resolution committee process as a means of identifying concerns generated by Foster/Adoptive Parent Association and the Department.	Foster Care Program Officer (Liaison to Montana State Foster/ Adoptive Parent Association)	On-going; continuation of current practice
2. Partnership training regarding foster and adoptive placements will have high priority statewide. Training will be provided to appropriate staff and foster/adoptive parents.	Foster Care Program Officer, Training Officer and appropriate regional/local department staff	Spring 1996 and On-going

Objective 3: Expand training resources for Foster/Adoptive Parents.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Continue to support an annual statewide training conference of the Montana State Foster/Adoptive Parent Association (MSF/APA).	Refinancing Program Officer, Foster Care Program Office, Training Officer, Training Standing Committee, MSF/APA Officers and conference planning committee	Current schedule: annual conference
2. Explore expanded and additional training methods and resources with representatives from the MSF/APA.	Foster Care Program Officer, Adoption Program Officer, Training Officer, Training Standing Committee, Regional Administrators, MSF/APA Officers	Spring, 1996 and On-going

GOAL: Provide interface with other Department initiatives.

Objective 1: Continue with planning and implementation of the Families For Kids project which focuses on permanency for children in foster care, the majority of whom are in family foster home care placements.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Attend Families for Kids meetings.	Foster Care Program Officer	On-going
2. Provide information regarding foster care issues as needed.	Foster Care Program Officer	On-going

3. Collaborate in training and program development. (See the objectives in the Families for Kids Project sections of this plan.)	Regional, Field Staff; Central Office Staff; FFK Project Director; CPS Program Officer; Foster Care Program Officer	Summer, 1996 and On-going

Objective 2: Plan and evaluate processes related to recruitment and retention of foster parents and development of a Kinship Care policy.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Select a representative group of Department staff to explore and evaluate the present status of foster care provided recruitment/retention effectiveness and current practice of utilizing kinship care placements.	Children's Services Licensing Program Officer, Adoption Program Officer, Kinship Care Task Force of FRS's and Central Office Staff, Foster Care Program Officer	Summer, 1996 and On-going
2. Draft kinship care policy for Child and Family Services Manual.	Foster Care Program Officer	9/95

Objective 3: Assure compliance with the Multi-Ethnic Placement Act (MEPA).

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Analyze statutes, rules and policy to identify changes necessary for compliance with MEPA.	Foster Care Program Officer, Bureau Chief, Child & Family Services Standing Committee	8/31/95
2. Develop and implement plan to achieve compliance with MEPA.	Foster Care Program Officer, Bureau Chief, Child & Family Services Standing Committee	10/21/95
3. Submit amended plan, incorporating MEPA plan, for family preservation/family support to Administrator for Children and Family Programs.	Foster Care Program Officer, Bureau Chief, Child & Family Services Standing Committee	10/21/95

B-12: YOUTH GROUP HOME FOSTER CARE SERVICES

Community-based group homes provide residential services to youth who have been removed from their families due to protective services issues and/or delinquent behaviors. Group homes provide safe, structured environments which address the specific therapeutic, behavioral and emotional needs of the youth in residence. Usually, group homes rely on community resources to provide therapeutic and educational resources to the youth in residence although some provide in-house counseling services. Some group homes serve specialized populations such as chemically dependent youth or adolescent female victims of sexual abuse.

In FY95, the Department contracted with 32 group home service providers who serve a maximum daily population of 256 youth. The contracted rates for these services range from $42.46/day to $81.08/day. Rates are determined by the Department's Foster Care Rate Matrix

which establishes payments based upon the amount of treatment and supervision provided by the group home staff.

Note: Youth group care is a foster care service. For goals and action steps for foster care, refer to Family Foster Care Section of this plan.

GOAL: Provide safe and structured environments to youth in need of community-based services.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Maintain statewide availability of this service.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Assure contracts are issued in a timely manner and contain language appropriate to the services provided.	Residential Care Specialist; Contract Officer	On-going
2. Assure services provided are in compliance with contract language.	Residential Care Specialist; Program Officer for Contract Monitoring	On-going
3. Support contracted providers of this service in the development and adoption by providers of service/program standards.	Residential Care Specialist	6/30/97

Objective 2: Develop additional resources for this service.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Support expansion of this service as determined by local needs assessments.	Field Staff; Region Administrators; Residential Care Specialist	On-going

B-13: ADOPTION SERVICES

The adoption program is an extension of the protective services provided by the Department. Facilitating a child's adoption is a way of providing security for and meeting the developmental needs of a child by transferring on-going parental responsibilities for the child from the birth parents (or agency) to the adoptive parents. Adoption provides children with legal ties to another family when the child's birth family has been determined to be permanently unable or unwilling to care for the child.

The Department is committed to a philosophy of permanency planning for children, of which adoption is a component, that begins with the first contact by the Department with the child's family. The underlying philosophy of the Department's permanency planning is based on the belief that children need and have a right to a stable, permanent home of their own which will meet the child's needs while providing the child with lifetime family connections.

GOAL: Provide each child with a permanent legal family whenever possible.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Provide children whose parental rights have been terminated with a family with whom they will have a lifetime connection; and **Objective 2:** Provide children with an accepted and recognizable status of belonging through the legal tie of a summary decree of adoption.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Recruit, prepare and assess prospective adoptive parents to meet the needs of children awaiting adoptive placement by the Department.	Family Resource Specialists	On-going
2. Conduct on-going training and education for adoptive parents.	Family Resource Specialists and Central Office staff	On-going
3. Prepare children to be adopted.	Community Social Workers	On-going

4. Assist children in maintaining relationships with others, including birth family members, who will contribute to an individual child's positive growth and development.	Central Office Staff, Family Resource Specialists, Adoptive parents	On-going
5. Provide post-placement social work services to adoptive parents and children to assist in preservation of family unit.	Family Resource Specialists	On-going
6. Meet the child's physical, mental and emotional needs in the most appropriate family, with the assistance of an adoption subsidy if necessary to meet the child's special needs.	Department staff and Adoptive Parents	On-going

Objective 3: Develop a new management information system (CAPS, Children and Adult Protective Services) to provide a data base for performance indicators related to numbers of children in need of adoptive homes, numbers of available adoptive families and numbers of children whose adoptions have been finalized. CAPS will replace the Department's current management information system, which was not designed to provide management with adoption information.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Use funding from the Montana Legislature and the U.S. Department of HHS to develop an effective management information system for adoption. The CAPS (Child and Adult Protective Services) computer system has been designed and the Department is currently involved in the system programming stage of the CAPS Project.	CAPS Project staff and Central Office Adoption Program staff	On-line in the Fall of 1996
2. Use the CAPS system to provide a data base for performance indicators related to questions such as the numbers of children in need of adoptive homes, numbers of available adoptive families and numbers of children whose adoptions have been finalized.	Family Resource Specialists, Community Social Workers, Central Office staff	Fall, 1996 and on-going

Objective 4: Increase the number of Family Resource Specialists available to complete adoptive home assessments and to provide post placement services for families; and

Objective 5: Establish Permanency Planning Workers in each of the Department's regions to identify children in need of adoptive families, to expedite the placement of identified children in adoptive homes and to reduce the length of time children spend in foster care.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
The Department and the Montana Adoption Resource Center applied for and received a grant from the W.K. Kellogg Foundation, the Families for Kids (FFK) Project, to reform Montana's adoption program and effect system-wide change. This grant, coupled with the new CAPS management information system, will provide the department with an exciting opportunity to bring about lasting change the delivery of adoption services, including the items in Objectives #4 and #5. (Also See the FAMILIES FOR KIDS PROJECT program description in this five year plan document).	Regional and Central Office Department staff and the Montana Adoption Resource Center	On-going

Objective 6: Assure compliance with Multi-Ethnic Placement Act.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Analyze statures, rules, and policy to identify changes necessary for compliance with MEPA.	Permanency Specialist; Foster Care Program Officer	8/31/95
2. Develop and implement plan to achieve compliance with MEPA.	Permanency Specialist; Foster Care Program Officer	10/21/95

B-14: SUBSIDIZED ADOPTION

GOAL: Encourage and promote the adoption of children who have special needs. Support services and financial and medical assistance are provided to ensure the health and welfare of eligible children who would not likely have a permanent home without provision of a subsidy. The subsidized adoption program is a means of assuring that the state complies with federal and state laws, policies and court decisions which clearly identify that every child has a fundamental right to a permanent family with whom they have a lifetime connection.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Ensure that the special needs of the eligible children will be met through adoption subsidy.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Compare the services available through the foster care program with those available through the state subsidy program to determine if some services should also be made available to adoptive parents through subsidy.	Central Office, Child and Family Services Standing Committee	On-going
2. Identify as accurately as possible the special needs of children for whom an adoption subsidy is to be provided and what services are needed to meet these needs.	Community Social Workers, Family Resource Specialists, Private Agency Staff	On-going
3. Assure that all public and private agencies are familiar with the eligibility requirements for subsidized adoption and the procedure for applying for subsidized adoption on behalf of a child.	Central Office	On-going
4. Produce a brochure which could be distributed to agencies and families describing the subsidized adoption program.	Central Office	On-going

B-15: THERAPEUTIC FOSTER CARE SERVICES

Therapeutic Foster Care is a clinically-oriented program for children and youth whose special needs can best be met in the home of specially-trained foster parents who receive on-going training and supervision by clinical staff. As a program, Therapeutic Foster Care is child/youth centered, team-oriented, and culturally sensitive. This service is available statewide and is purchased by the Department through contracts with nine private, not-for-profit agencies with offices located in Missoula, Kalispell, Great Falls, Havre, Bozeman, Butte, Billings, Miles City, and Glasgow. These offices serve youth in treatment families located in 43 counties.

Note: Therapeutic foster care is a foster care service; therefore, for goals, objectives and action steps for foster care, refer to the Family Foster Care Services Section of this plan.

GOALS:

- Provide therapeutic services to children in a family environment when appropriate.
- Prevent placement in more restrictive environments by providing therapeutic interventions in a treatment foster family setting under the supervision of clinical staff in accordance with the goals and objectives of a plan of active treatment.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Maximize funding and availability of TFC service.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Refinance TFC through Medicaid (EPSDT)	Residential Care Specialist	8/10/95
2. Increase number of available TFC slots statewide.	Central Office Staff	On-going

Objective 2: Maintain statewide availability of this service.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Assure contracts are issued in a timely manner and contain language appropriate to the services provided	Residential Care Specialist, Contract Officer	On-Going
2. Assure services provided are in compliance with contract language.	Residential Care Specialist, Program Officer for Contract Monitoring	On-going
3. Support contracted providers of this service in the development and adoption of program standards.	Residential Care Specialist	6/30/97

Objective 3: Develop additional resources for this service.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Support expansion of this service as determined by local needs assessments.	Field Staff, Region Administrators, Residential Care Specialist	On-going

B-16: THERAPEUTIC YOUTH GROUP HOME CARE

Therapeutic Youth Group Homes (TYGH) provide community-based treatment services to children and youth who meet the Montana Medicaid medical necessity requirements for this level of clinical intervention. TYGH's are designated Moderate, Campus-Based, or Intensive according to the staff-to-child ratios in each group home and the frequency of clinical interventions provided by the clinical group home staff.

Note: Therapeutic youth group care is a foster care service; therefore, for goals, objectives and action steps for foster care, refer to the Family Foster Care Services Section of this plan.

GOAL: Provide treatment to children and youth who would otherwise be served in more restrictive levels of care.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Provide therapeutic services to children and youth in community-based and community-integrated programs, enabling them to attend local schools, utilize community recreational programs and community providers of medical, dental and other needed services.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Increase access through targeted expansion of 52 slots.	Regional Administrators, Residential Care Specialist	6/30/97
2. Expand eligibility for TYGH service through inclusion of this service as part of the Medicaid 1115 Waiver request which, if approved, will increase Medicaid eligibility for Mental Health Services to 200% of poverty level.	Residential Care Specialist, Medicaid Division	Medicaid Waiver Request to be submitted not later than 12/96

Objective 2: Prevent placement of youth into more restrictive environments or facilitate timely discharge from more restrictive settings both in and out-of-state.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Evaluate the medical treatment needs of youth needing out-of home interventions and refer appropriate youth for TYGH services.	Regional Administrators, Managing Resources Montana	On-going
2. Evaluate effectiveness of treatment of youth in more restrictive settings and refer appropriate youth to TYGH services.	Regional Administrators, Managing Resources Montana	On-going

Objective 3: Prevent inappropriate placements of youth into TYGH services and ensure Montana Medicaid requirements are being met by conducting annual utilization reviews of each program.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Conduct utilization review on all providers of this service within 12 months of their obtaining Montana Medicaid provider status.	Residential Care Specialist, Montana Medicaid Division	On-going
2. Submit a work plan for utilization review to the Montana Medicaid Division for approval.	Residential Care Specialist	9/30/95 and annually thereafter
3. Conduct utilization review in accordance with the approved annual work plan.	Residential Care Specialist, Montana Medicaid Division	On-going

Objective 4: Maintain statewide availability of this service.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Assure contracts are issued in a timely manner and contain language appropriate to the services provided	Residential Care Specialist, Contract Officer	On-Going
2. Support contracted providers of this service in the development and adoption of program standards.	Residential Care Specialist	6/30/97

Objective 5: Develop additional resources for this service.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Support expansion of this service as determined by local needs assessments.	Field Staff, Region Administrators, Residential Care Specialist	On-going

B-17; RESIDENTIAL TREATMENT

GOAL: Provide access to intensive in-patient clinical interventions to address the needs of seriously emotionally disturbed children and youth who require treatment on a long-term basis.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Cooperate with other agencies to maximize services for seriously emotionally disturbed children and youth.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Participate on the Managing Resources Montana (MRM) State Team.	Central Office Staff	On-going
2. Evaluate the treatment needs of youth requiring this level of intensive services	Field Staff in collaboration with Local Managing Resources Montana staff	On-going
3. Refer those youth requiring this level of intervention to MRM.	Field Staff; Regional MRM Team	On-going
4. Incorporate this service in the Montana Medicaid 1115 Waiver request..	Residential Care specialist and Montana Medicaid Division	12/95

IX-C: QUALITY ASSURANCE SERVICES

PROGRAM	GOALS
1. LICENSING PROGRAM	1. Ensure that every individual and agency which provides part-time or full-time care and services to a child provides that care at a basic level that will insure safety, health and well-being; 2. Be preventive by protecting children by reducing risks ahead of time rather than intervening after the problem has presented itself; and 3. Assure equitable treatment of children in a way that also protects the rights of service providers, parents or other responsible persons.
2. CONTRACT MONITORING	1. Monitor contracts consistently statewide for the Department's contracted services, while addressing gaps in the delivery system within communities, regions, and statewide; 2. Improve the Department's individual and statewide contracted services through collaborative efforts; and 3. Identify contracted family-based services, foster care and youth treatment program objectives and standards, including specific preferred client outcomes and critical success variables for each area of assigned responsibility.
3. TRAINING PROGRAM	1. Assure that the training program builds and enhances staff skills and knowledge; and 2. Maximize training services by collaborating with other agencies.
4. REVIEW COMMITTEES/ BOARDS	Comply with PL 96-272 and state statutes regarding review of foster care placements.
5. COURT IMPROVEMENT PROJECT	Collaborate with the Office of the Supreme Court Administrator to assess and improve proceedings relating to foster care, adoption and related responsibilities for the protection of children.
6. CAPS PROJECT	Improve the Department's ability to set goals, measure performance and evaluate outcomes, anticipate changes that must be made in organization and staffing structures, and provide accurate statistics to the state legislature, the Governor's Office, the Federal Government, advocacy groups, and other appropriate entities.
7. CHILDREN'S SERVICES REFORM AND REFINANCING PROJECT	Maximize state special revenue and federal funds to support costs previously supported entirely by general fund.

8. (Proposed) QUALITY ASSURANCE PROGRAM FOR CHILDREN IN FOSTER CARE	A Proposed "Quality Assurance Plan to Evaluate Out-Of-Home Care Services" is included in Section IX-C.

C-1: CHILDREN'S SERVICES LICENSING

This program promotes the protection, safety and well-being of youth in substitute and out-of-home care facilities through the promulgation and enforcement of specific rules regarding the individual's care and the qualifications of the provider. Licensing is a quality control process in that it sets the floor below which it is illegal to operate and enforces compliance to that level. The Department employs 28.25 FTEs as Family Resource Specialists (FRS). With the exception of the five (5) FRS workers who specialize in day care licensing and registration services, all FRS staff are combination workers who are responsible for the licensing of all out-of-home, substitute care facilities, day care facilities and all adoption services.

GOALS:

- Ensure that every individual and agency which provides part-time or full-time care and services to a child provides that care at a basic level that will insure safety, health and well-being;
- Be preventive in nature by protecting children by reducing risks ahead of time rather than intervening after the problem has presented itself; and
- Assure equitable treatment of children in a way that also protects the rights of service providers, parents or other responsible persons.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Develop policy related to all levels of Departmentally-licensed care and provide training on these policies to FRS staff and FRS supervisors as well as to all Department CPS supervisors.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Complete development of Day Care licensing policy.	Day Care Program Officer and Licensing Standing Committee (LSC)	6/1/95
2. Complete development of Youth Care Facility General licensing policy, including philosophy, approval process, negative licensing action, grievance procedures, out-of-home care investigations.	Children's Services Licensing Officer, LSC, and CPS standing committee for out of home care investigations	7/1/95

3. Complete development of Youth Foster Home licensing policy.	Children's Services Licensing Officer and LSC	7/1/95
4. Complete development of Youth Group Home (regular and therapeutic) licensing policy.	Children's Services Licensing Officer and LSC	7/1/95
5. Complete development of Child Care Agency licensing policy.	Children's Services Licensing Officer and LSC	7/1/95
6. Complete development of Child Placing Agency licensing policy.	Children's Services Licensing Officer and LSC	8/15/95
7. Conduct training on licensing policies related to Children's Day Care and all levels of Youth Care Facilities.	Children's Services Licensing Officer; Day Care Program Officer; LSC; and Legal Unit	9/15/95
8. Conduct on-going review of all levels of licensing policy for revision and retraining needs.	Children's Services Licensing Officer; Day Care Program Officer and LSC	On-going through 6/30/99

Objective 2: Provide training to FRS staff and FRS supervisors on the foundation, rationale, application and assessment of requirements in each of the 13 primary and secondary levels of licensed care and

Objective 3: Provide training to FRS staff and FRS supervisors on accepted licensing ARM (Administrative Rules of Montana) revisions.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Develop and present training related to licensure of Juvenile Detention Centers.	Juvenile Corrections Program Officer and Children's Services Licensing Officer	Completed

2. Develop and present training related to licensure of Therapeutic Youth Group Homes and the roles of Utilization Review and Contract Monitoring.	Children's Services Licensing Officer, Treatment/Intervention Unit staff and Legal Unit	Completed
3. Develop and present training related to licensure of Children's Family Foster Homes.	Children's Services Licensing Officer and Legal Unit	5/24/95 initial; On-going as needed through 6/30/99
4. Develop and present training related to licensure of Day Care Facilities.	Day Care Program Officer and Legal Unit	5/24/95 initial; On-going as needed through 6/30/99
5. Develop and present training related to licensure of Regular Youth Group Homes, Child Care Agencies and Child Placing Agencies.	Children's Services Licensing Officer, FRS Supervisors	7/31/96 initial; On-going as needed through 6/30/99
6. Develop a process by which the Department can systematically review all seven primary levels of ARM to ascertain the need for revision by modification, deletion or amendment.	Children's Services Licensing Officer, LSC, Legal Unit	3/31/95
7. Provide training to FRS staff on the application of accepted rule revisions.	Children's Services Licensing Officer, FRS Supervisors	On-going through 6/30/99

Objective 4: Provide training to FRS staff and FRS supervisors on the enforcement of licensing rules pursuant to the fair hearing process.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Complete and distribute Fair Hearing procedure handbooks.	Hearing Officer, Legal Unit, Program Management Division Administrator	5/24/95 initial; On-going as needed through 6/30/99
2. Provide training on policy related to negative licensing action and the applicant's right to a fair hearing.	Legal Unit, Children's Services Licensing Officer	9/15/95 initial; On-going as needed through 6/30/99
3. Provide training on the legal foundations of licensing.	Legal Unit, Children's Services Licensing Officer	5/96 initial; On-going as needed through 6/30/99

Objective 5: Identify specialized training needs of Family Resource Specialists and provide training to FRSs and FRS supervisors on identified areas; and

Objective 6: Conduct or provide annual training for licensing workers and supervisors on national trends and methodologies in licensing.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Complete initial assessment of immediate FRS training needs by polling FRS supervisors.	Children's Services Licensing Officer, Training Officer, LSC	8/94 Completed
2. Schedule specialized training priority of Fire Safety Assessment.	Children's Services Licensing Officer, Fire Marshall	5/23/95
3. Develop questionnaire to identify specialized training needs of FRS staff.	Children's Services Licensing Officer	5/15/95

4. Send questionnaires to FRS staff and their supervisors and review completed questionnaires.	All FRS staff, 5 FRS Supervisors, Children's Services Licensing Officer	6/15/95
5. Develop a specialized training plan for Family Resource Specialists.	Children's Services Licensing Program Officer, LSC, Permanency Program Officer, Day Care Program Officer, Foster Care Program Officer	10/31/95 initial.... on-going through 6/30/99

Objective 7: Provide training to all new field staff (FRS, CPS) related to the role of licensing as a protective service and its relationship to the Department's mission; and

Objective 8: Increase partnership efforts between CPS staff, FRS staff and agency foster families.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Develop overview of licensing training module (aka "Building a Partnership with Foster Families").	Children's Services Licensing Program Officer, Training Officer	12/31/94; completed
2. Present module at first and second MCAN training (Montana Child Abuse and Neglect/basic CPS worker training) set for 1995.	Children's Services Licensing Program Officer	1/10/95 and 4/06/95; completed
3. Review training evaluations and revise module as needed.	Children's Services Licensing Program Officer, Training Officer, Training Standing Committee	10/31/95

4. Provide training in "overview of licensing" module as needed (per number of times MCAN training is conducted annually).	Children's Services Licensing Program Officer	On-going through 6/30/99

Objective 9: Provide core training to FRS staff related to the conceptual nature of licensing, legal foundations, the licensing process, licensing enforcement and human relations and the licensing role; and
Objective 10: Develop a process by which core training pertinent to the field of licensing will be provided to all new FRS staff.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Develop or locate a core curriculum for licensing workers.	Children's Services Licensing Program Officer	9/30/95
2. Review curriculum for decisions on manner of presentation.	Children's Services Licensing Program Officer, LSC	11/31/95
3. Present curriculum to FRS staff.	Children's Services Licensing Program Officer and identified trainers from LSC and Legal Unit	3/31/96
4. Debrief on curriculum presentation and decide approach for training new FRS staff.	Children's Services Licensing Program Officer and LSC	5/31/96
5. Provide on-going core curriculum to incoming FRS staff in manner decided in step #4.	Children's Services Licensing Program Officer and LSC	On-going through 6/30/99

Objective 11: Develop a category of out-of home care via policy and identified ARM changes that more effectively supports kinship placements; and
Objective 12: Increase the number of Indian Family placement resources for Indian Children who require out-of-home care through the development of kinship care policies; and

Objective 13: Provide training to all CPS and FRS staff on Department policies related to the development and use of kinship resources.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Solicit support of proposed action from Regional Administrators.	Children's Services Licensing Program Officer and ICWA Specialist	3/7/95; completed
2. Create an ad hoc Kinship Care Committee committed to the development of joint CPS and Licensing policies which support kinship placements both on and off reservations.	Children's Services Licensing Program Officer, Regional Administrators, Bureau Chief	3/24/95; completed
3. Conduct first meeting with Kinship Care Committee and set time frame for completion of proposals.	Children's Services Licensing Program Officer, Ad Hoc Kinship Committee	4/7/95; completed
4. Prepare proposal for submission to the Department's management team.	Children's Services Licensing Program Officer	8/30/95
5. Submit proposal to the management team.	Children's Services Licensing Program Officer, ICWA Specialist	9/30/95
6. Incorporate proposed policies into both the CPS and the Licensing Manuals.	Children's Services Licensing Program Officer and LSC, Bureau Chief and CPS Standing Committee, Foster Care Program Officer	11/30/95

7. Develop means to effectively train field staff (FRS, CPS and CSWS) in use of Kinship policies/practice.	Children's Services Licensing Program Officer, Ad Hoc Kinship Committee, LSC, CPS SC, Training Standing Committee, Foster Care Program Officer	8/30/95
8. Provide training to field staff on Kinship practice and policies.	Varied	Present and on-going through 6/30/99

C-2: CONTRACT MONITORING

One Central Office Contract Monitor coordinates the development of the contract monitoring process with one full-time equivalent field staff position shared by eleven Regional Contract Monitors. The contract monitors work collaboratively with Regional Administrators, the Department's Legal Unit, the Management Support Services Division, the Program Management Division, other related professional agencies, and service providers. Contract Monitoring provides quality assurance to meet successful client outcomes, compliance with purchased services in the Deparment's contracts, and resource information to related positions and fields of practice.

GOALS:

- Monitor contracts consistently statewide for the Department's contracted services, while addressing gaps in the delivery system within communities, regions, and statewide;
- Improve the Department's individual and statewide contracted services through collaborative efforts; and
- Identify contracted family-based services, foster care and youth treatment program objectives and standards, including specific preferred client outcomes and critical success variables for each area of assigned responsibility.

Objective 1: Revise the Service Facility Profile (SFP) and youth group home contracts for FY96. Included in this revision will be the development of GUIDELINES (reference tool) to accompany the Service Facility Profile.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Distribute SFP and GUIDELINES to Department personnel for comment and review.	Central Office Contract Monitor	3/95
2. Make necessary revisions to SFP and GUIDELINES prior to mailing to providers.	Central Office Contract Monitor	5/95
3. Send SFP and GUIDELINES to service providers for comment & review.	Central Office Contract Monitor	5/95
4. Make final revisions for FY96 distribution, and mail out to providers on disk.		6/95
5. Review all SFP's for accuracy, clarity, and compliance issues prior to contract issuance.	Central Office Contract Monitor; Regional Monitors	7/95
6. Implement any necessary revisions to SFP and GUIDELINES for FY97.	Central Office Contract Monitor	4/96
7. Distribute draft copies of SFP and GUIDELINES for FY97 to Department personnel and providers.	Central Office Contract Monitor	4/96
8. Make final revisions for FY97 distribution, and send to providers on disk.	Central Office Contract Monitor	5/96

Objective 2: Review 100% of the youth group home contracts.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Complete 10 pilot reviews in two phases.	Central Office Contract Monitor and Regional Monitors	3/95
2. Submit written reports to five facilities reviewed in phase two.	Central Office Contract Monitor and Regional Monitors	5/95
3. Revise monitoring forms used in pilot phases as necessary, prior to follow-up visits and any additional contract reviews.	Central Office Contract Monitor and Regional Monitors	5/95
4. Complete follow-up visits and reports from phase two reviews.	Central Office Contract Monitor and Regional Monitors	12/95
5. Provide regular written updates to contracted foster care providers and regional monitors.	Central Office Contract Monitor and Regional Monitors	6/97

6. Meet quarterly to develop all facets of the contract monitoring process for identified contracts for services.	Central Office Contract Monitor; Regional Monitors; Protection and Intervention Unit Chief; Regional Administrators	6/99
7. Conduct 10 additional youth group home contract reviews.	Central Office Contract Monitor and Regional Monitors	6/96
8. Submit written reports to the 10 facilities selected for contract review.	Central Office Contract Monitor and Regional Monitors	8/96
9. Complete follow-up visits and reports from 10 contract reviews.	Central Office Contract Monitor and Regional Monitors	5/97
10. Conduct remaining youth group home contract reviews (12+).	Central Office Contract Monitor and Regional Monitors	6/97
11. Submit written reports to the remaining facilities selected for contract review.	Central Office Contract Monitor and Regional Monitors	8/97

12. Complete follow-up visits and reports from the remaining facilities selected for contract review.	Central Office Contract Monitor and Regional Monitors	5/98

Objective 3: Develop a plan for monitoring therapeutic youth group homes, therapeutic foster care, Family Based Services, Big Brothers/Big Sisters, Domestic Violence, Day Care, Catholic Social Services, Casey Family Program, and "Partnership Project" contracts.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Develop an initial work plan.	Central Office Contract Monitor, Protection and Intervention Unit Chief Regional Administrators, Regional Monitors	7/95
2. Propose initial work plan to Management Team.	Central Office Contract Monitor, Protection and Intervention Unit Chief	9/95
3. Formulate a final work plan.	Central Office Contract Monitor, Protection and Intervention Unit Chief, and Regional Monitors	12/95

Objective 4: Develop policy and procedure for the Department's contract content and monitoring.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Develop a pilot monitoring process for each type of contract to be monitored (with input from Management Team, other relevant Department personnel, and service providers).	Central Office Contract Monitor; Chief of the Protection and Intervention Unit; Regional Monitors; Regional Administrators; Management Team, other Department personnel and service providers	6/96
2. Make revisions to each monitoring process which reflect a collaborative Department and service provider effort to improve program development and services provided.	Same as above	12/96
3. Define critical success variables and preferred client outcomes.	Same as above	3/97
4. Formulate written policies and procedures with input from Management Team, other Department personnel and service providers.	Same as above	6/97

C-3: TRAINING PROGRAM(S)

In November, 1993, the Department formed a Training Standing Committee staffed by the Department Training Officer. The members of the committee are social workers, supervisors, regional administrators and central office staff. The role of the committee is to develop the training plan for the department.

GOALS: Assure that the training program builds and enhances staff skills and knowledge.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Incorporate family support and family preservation concepts into the Montana Child Abuse and Neglect (MCAN) training curriculum for newly hired workers.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Develop a unit for MCAN on Family Preservation and Support.	Training Officer	2/95
2. Review training unit.	Training Committee	4/95
3. Incorporate new unit into MCAN curriculum.	Training Officer	5/95
4. Review evaluation of MCAN unit and make revision if necessary.	Training Committee	6/95

Objective 2: Develop individual training plans for all staff.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Develop a plan within the Program Management Division whereby current training records are recorded in a timely manner.	Training Officer, Bureau Chief, Division Administrator	1/96
2. Complete training records summary for all staff and provide worker and supervisor with his/her summary.	Training Officer	6/96

3. Meet with supervisors to explain the individual training plan process, their role in the process, and impact on workers.	Training Officer	1/96
4. Make training events sponsored by agency available to interested public and private human services staff, within the limits of funds available.	Training Officer	7/96
5. Publish and distribute training calendars on a quarterly basis to all staff.	Training Officer	Quarterly
6. Develop methods to better coordinate and cooperate on interagency training.	Training Officer	Monthly

Objective 3: Provide training for protective service workers, community social worker supervisors, and family resource specialists which is culturally relevant and family-centered.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Require MCAN training for all newly-hired workers and refresher courses for current social workers and supervisors, as necessary.	Training Program Officer, Regional Administrators	On-going
2. Provide training to staff according to Department training plan.	Training Program Officer, Regional Administrators, Training Committee	On-going

Objective 4: Provide staff with additional opportunities for enhancement of cultural competency and family-centered practice skills.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Research training programs.	Training Program Officer, Training Standing Committee	On-going

Objective 5: Assess the Department's ability to implement a competency-based training program.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Identify a nationally recognized competency-based training program which is endorsed by the Child Welfare League	Training Officer	3/95
2. Send a team of Department staff to participate in and assess the program.	Designated Staff Members	4/95
3. Present summary report to Training Standing Committee.	Designated Staff	5/95
4. Research other competency-based programs and assess the feasibility of a site visit.	Training Officer, Training Standing Committee	6/96
5. Prepare summary report of all programs and make recommendations to Management Team.	Training Officer, Training Standing Committee	8/96

Objective 6: Develop the needs assessment plan and the implementation plan of the competency-based training program, if the Department determines that implementation is appropriate.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Develop and finalize initial needs assessment plan.	Management, Extended Management Teams, Regional Staff, Training Officer, Training Standing Committee	12/96
2. Conduct needs assessment.	Training Officer	6/97
3. Develop and finalize the implementation plan.	Management, Extended Management Teams, Regional Staff, Training Officer, Training Standing Committee	6/98

Objective 7: Enable staff to increase their skills and knowledge.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Explore the feasibility of utilizing Title IV-E funds to offer staff stipends to obtain advanced degrees.	Training Officer	12/95
2. Develop plan for offering stipend, if feasible.	Training Officer	4/96

3. Present plan to expanded Management Team for approval.	Training Officer	5/96
4. Implement plan.	Management Team	7/96

GOAL: Maximize training services by collaborating with other agencies.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Create a training institute.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Identify process required to create training institute.	Training Officer	2/95
2. Develop proposal for initial phase.	Training Officer	3/95
3. Review and approve plan for initial phase.	Training Officer, Training Committee, Management Team	4/95
4. Draft and execute contract.	Training Officer	7/95
5. Identify next phase in creating a fully-funded training institute.	Training Committee, Management Team	12/95

C-4: REVIEW COMMITTEES/BOARDS

All children in substitute care shall be afforded the opportunity for permanency. Congress passed PL 96-272 to monitor the placement of children in foster care. This legislation requires that the case of each eligible child be reviewed "periodically but no less frequently than once every six months by either a court or agency administrative review". The Department encouraged the Legislature to establish Foster Care Review Committees (FCRC) also known as administrative reviews. In 1993 and 1995 the Legislatures established another form of foster care review, the Citizen Review Boards (CRB). The CRB's started as a pilot in Missoula County and consist of volunteers appointed by the Fourth Judicial District judges to provide the mandated reviews of children in foster care for that jurisdiction.

GOAL: Comply with PL 96-272 and state statutes regarding review of foster care placements.

Objective 1: Continue the Foster Care Review Committees, also known as administrative reviews, in all jurisdictions where the CRB is not established.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Continue with existing FCRC and procedures in all Montana Judicial Districts.	Department, Judicial Districts	On-going
2. Appoint Foster Care Review Committee members.	District Court Judge	8/95

Objective 2: Collaborate with the Supreme Court Coordinator in planning for the expansion of the CRB.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Schedule planning meetings at specifically identified sites.	Regional Administrator and Staff; Supreme Court Coordinator; CPS Program Officer; ICWA Specialist	On-going

2. Determine planning schedules at specified sites as needed in the development and implementation of this program.	RA and Staff; Supreme Court Coordinator; CPS Program Officer	On-going
3. Liaise with Supreme Court at central office level regarding communication and collaboration in policy and program issues which may need to be identified and addressed.	CPS Program Officer	On-going
4. Liaise with Supreme Court at field level regarding communication and field staff issues which may need to be identified and addressed.	Regional Administrator	On-going

Objective 3: Assess and prepare for the perceived impact of the anticipated expansion of the CRB on the Department Regional staff including any fiscal note.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Assess the impact on staff and prepare strategies for resolving identified issues.	RA's and Staff; Supreme Court Coordinator; CPS Program Officer	On-going
2. Develop fiscal notes for involved regions.	RA's and Staff; Supreme Court Coordinator; CPS Program Officer	On-going

Objective 4: Assist the Supreme Court Coordinator in the development and implementation of the evaluation of the CRB pilot.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Develop the evaluation process with the Supreme Court Coordinator.	Supreme Court Coordinator, CPS Program Officer, RA/ Staff	To be determined by the Supreme Court Coordinator.

Objective 5: Assist, as requested, in the development of a training curriculum for the CRB members.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Assess the training needs of the CRB volunteers.	Supreme Court Coordinator; CPS Program Officer; Training Officer, Central Office; ICWA Specialist; RA and Staff	On-going
2. Assess the need for "cross training CRB and staff."	Supreme Court Coordinator; CPS Program Officer; Training Officer, Central Office;	On-going

C-5: COURT ASSESSMENT PROGRAM

The Office of the Supreme Court Administrator must conduct assessments of the role, responsibilities and effectiveness of the State court system in carrying out State laws implementing Title IV-B and IV-E of the Social Security Act. This project examines the effectiveness, timeliness, and quality of proceedings which determine (A) whether to assume court jurisdiction over children, (B) whether to utilize foster care placement, (C) whether to terminate parental rights, (D) whether the goal for a child in foster care should be independent living, and (E) whether to finalize an adoption or other permanent placement.

Improvements may include but are not limited to: changes in State law or proposals for change in Federal law; changes in procedures and practices of the courts or of the Department; additional education and/or training of court or agency personnel, including but not limited to judges, attorneys, social workers, administrators and court-appointed representatives of parents and children; changes needed to enable the courts to effectively manages caseloads; improve the coordination of services for children.

GOAL: Collaborate with the Office of the Supreme Court Administrator to assess and improve proceedings relating to foster care, adoption and related responsibilities for the protection of children.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Assist the Office of the Supreme Court Administrator to assess the role and responsibilities of the State court system in enforcing state laws regarding the effectiveness, timeliness and quality of foster care proceedings.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Work in collaboration with the Office of the Supreme Court Administrator, the Citizen Review Boards, Foster Care Review Committees, county attorneys, court-appointed special advocates, and guardians-ad-litem to conduct assessment and identify necessary improvements.	Supreme Court Administrative Officer; Legal Staff, Central Office Staff; CPS Program Officer; Department Staff	10/96

2. Assist the Supreme Court Administrator in developing a plan for improving aspects of the court process based upon assessment results.	Supreme Court Administrative Officer; Legal Staff, CPS Program Officer	9/98
3. Implement the recommendations of the Supreme Court Administrator which are relevant to the Department, if feasible.	Management Team; CPS Program Officer; Field Staff; Legal Staff	9/98
4. Appoint the Supreme Court Administrative Officer to the Children's Justice Task Force.	Bureau Chief	2/95

C-6: CAPS PROJECT (Management Information System)
The tracking system currently used by the Department is predominately a manual operation. Coinciding with the adoption of the Federal AFCARS and SACWIS requirements, the Department embarked on its own objective to improve its management information system. The Department contracted with BDM Technologies to develop a fully automated information system titled CAPS: Children and Adult Protective Services. Pilot testing is planned for late 1995 with statewide implementation by the Fall of 1996.

The automated CAPS system will cover all major program areas and is designed to capture information about individuals and track them as they move through the Department's delivery system. The scope of the system encompasses reports of abuse and neglect, person identification, services, caseload management, provider maintenance, contract management, payments, system utilities, and interface with other automated systems.

The introduction of a comprehensive automated system will have a great impact on the future operation of the agency in terms of both the daily management functions and the ability to perform critical analyses for short- and long-range planning.

GOAL: To improve the Department's ability to set goals, measure performance and evaluate outcomes, aniticipate changes that must be made in organization and staffing structures, and provide accurate statistics to the State legislature, the Governor's Office, the Federal Government, advocacy groups, and other appropriate entities.

ACTION STEPS AND TIMELINES FOR OBJECTIVES:

Objective 1: Continue development of a new case management and information system in ways that will: a) support best practices in family foster care; (b) track and monitor key performance indicators; (c) generate required state and federal reports; and (d) fulfill all federal requirements for AFCARS (Adoption and Foster Care Reporting System), NCANDS (National Child Abuse and Neglect Data System) and SACWIS (Integrated Statewide Automated Child Welfare Information System).

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Complete development of the CAPS system.	CAPS Project Team; Field Staff; Central Office Staff in User Groups	Fall, 1995
2. Pilot the CAPS system in selected county offices and central office.	CAPS Project Team; Regional anc County Office Staff; Central Office Staff	Spring, 1996
3. Implement the CAPS system statewide.	Regional, County, and Central Office Staff with support from CAPS team.	Summer, 1996

Objective 2: Provide users of the CAPS management information system with the knowledge and skills necessary to maintain a level of user proficiency adequate to meet workload performance standards as defined by the Department.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Provide instructor-led hands-on training to all staff so all active open cases can be converted to CAPS.	CAPS Project Team; Field Staff and Central Office Staff in User Groups	6/30/96
2. Provide an evaluation of the training throughout the training process to help ensure the curriculum and materials are up-to-date and responsive to users' needs.	CAPS Project Team; Regional and County Office Staff; Central Office Staff	On-going
3. Implement the training plan for CAPS with adaptations and revisions, as necessary.	CAPS Project Team; Regional, County, and Central Office Staff	On-going, in accordance with the training plan

C-7: CHILDREN'S SERVICES REFORM AND REFINANCING PROJECT

GOAL: Maximize state special revenue and federal funds to support costs previously supported entirely by general fund.

Objective 1: Assure that eligible children are receiving Title IV-E Foster Care funds.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Train Regional Financial Specialists in IV-E Foster Care eligibility and compliance.	Program Officer	Quarterly
2. Train and provide technical assistance to caseworkers and clerical support staff within the region.	Regional Financial Specialists	On-going

3. Review all new placements within 90 days to determine IV-E eligibility.	Regional Financial Specialists	On-going
4. Review case files to assure that all compliance criteria are met.	Regional Financial Specialists	On-going
5. Review a random selection of IV-E Foster Care files throughout the state for quality assurance.	Quality Assurance Team	Annually
6. Update IV-E Foster Care policy materials.	Program Officer	As needed
7. Provide input regarding IV-E Foster Care policy and procedures to CAPS system staff, review all related screens and write help screens.	Users Group, Program Officer	On-going
8. Train all CAPS network users on IV-E Foster Care policy and procedures as part of conversion training.	CAPS Trainer	3/96
9. Communicate on a regular basis with Title IV-A central office staff to assure that AFDC-related criteria are accurately reflected in all IV-E Foster Care training and policy materials.	Program Officer	On-going
10. Chart fiscal data on IV-E Foster Care payments by county, by region, by month, by fiscal year and distribute charts and graphs to Child Welfare Management.	APS Computer Specialist, Program Officer	Quarterly

Objective 2: Assure that eligible children and their families are receiving Title IV-A Emergency Assistance funds.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Train Regional Financial Specialists in IV-A Emergency Assistance eligibility and compliance.	Program Officer	Quarterly
2. Train and provide technical assistance to caseworkers and clerical support staff within the region.	Regional Financial Specialists	On-going

3. Review case files to assure that all compliance criteria are met.	Regional Financial Specialists	On-going
4. Review a random selection of IV-A emergency assistance case files throughout the state for quality assurance.	Quality Assurance Team	Annually
5. Update IV-A Emergency Assistance policy materials.	Program Officer	As needed
6. Provide input regarding IV-A Emergency Assistance policy and procedures to CAPS system staff, review all related screens and write help screens.	Users Group, Program Officer	On-going
7. Train all CAPS network users on IV-A Emergency Assistance policy and procedures as part of conversion training.	CAPS Trainer	3/96
8. Communicate on a regular basis with Title IV-A Emergency Assistance central office staff to assure that services provided by county welfare offices and services provided by county child protection staff are coordinated and that all eligibility criteria are maintained.	Program Officer	On-going
9. Chart fiscal data on IV-A Emergency Assistance payments by county, by region, by month, by fiscal year and distribute charts and graphs to management team.	CAPS Computer Specialist, Program Officer	Quarterly

Objective 3: Collect child support for children placed in out-of-home care.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Train Regional Financial Specialists in Child Support Enforcement referral process and communication of changes in circumstances.	Program Officer	Quarterly
2. Train and provide technical assistance to caseworkers and clerical support staff within the region.	Regional Financial Specialists	On-going

3. Refer parents of children in out-of-home care to Child Support Enforcement and providing information on any change of circumstances.	Caseworkers	On-going
4. Monitor cases to assure that referrals have been submitted and that Child Support Enforcement is advised when the circumstances of the case change.	Regional Financial Specialists	On-going
5. Review child support referrals during annual quality assurance review of both IV-E Foster Care and state-funded foster care.	Quality Assurance Team	Annually
6. Update Child Support Enforcement referral policy materials.	Program Officer	As needed
7. Provide input regarding Child Support Enforcement referrals policy and procedures to CAPS system staff, review all related screens and write help screens.	Users Group, Program Officer	3/96
8. Communicate on a regular basis with Child Support Enforcement management to assure that services provided by county welfare offices and services provided by county child protection staff are coordinated and that all eligibility criteria are maintained.	Program Officer	On-going
9. Distribute child support collections data to Child Welfare Management.	Program Officer	Quarterly

C-8: A QUALITY ASSURANCE PROGRAM FOR CHILDREN IN FOSTER CARE (PROPOSED)

The Department has endeavored to maintain compliance with the case record requirements of both Section 427 and Title IV-E foster care. The Department has consistently passed all case-by-case federal compliance reviews. The requirements of P.L. 96-272 for permanency planning and quality care are essential to providing quality services, and the Department will assess a means of measuring the extent to which they are being met.

This quality assurance plan has been presented to the Department's Management Team for consideration. The plan was developed in response to the Foster Care Licensing and Related Foster Care Issues Audit conducted by the Office of the Legislative Auditor. This plan presents the means by which the Department could monitor the quality and appropriateness of the case plans that are being written for foster care cases, determine the extent to which they are being implemented, and document their effectiveness in re-uniting families and/or ensuring that children are placed into permanent living arrangements in the shortest possible time. To some extent, the Department has already implemented many of the activities listed in this plan.

GOAL: Ensure that every child who is placed in foster care has a written case plan that accurately reflects the nature of the problems that necessitated removal from the home, and prescribes services that will alleviate those problems in the shortest amount of time feasible. In the case of children for whom reunification with their families is not possible, this plan outlines the extent to which the planning process is designed to ensure that permanency is achieved as quickly as possible.

Objective 1: Determine the extent to which written case plans accurately describe the presenting problems in the case and the appropriateness and relevance of the prescribed services.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Draw a sample of the current foster care cases from the computer system.	Computing information system staff	Timeframe will be established if quality assurance plan is adopted.
2. Examine the case files and interview case workers and other relevant persons.	Quality Assurance Team	Timeframe will be established if quality assurance plan is adopted.
3. Prepare a report of the findings.	Quality Assurance Team	Timeframe will be established if quality assurance plan is adopted.
4. Present the findings to the Management Team.	Management Analyst	Timeframe will be established if quality assurance plan is adopted.

Objective 2: Determine the extent to which the services listed in the case plan are the services being provided.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Coordinate activities with other Department initiatives.	Quality Assurance Team	Timeframe will be established if quality assurance plan is adopted.
2. Interview birth parents, foster parents and, to the greatest extent possible, children to determine what services are being provided.	Quality Assurance Team	Timeframe will be established if quality assurance plan is adopted.
3. Interview service providers to determine what services they are providing and how they are being provided.	Quality Assurance Team	Timeframe will be established if quality assurance plan is adopted.
4. Prepare a report of the findings.	Quality Assurance Team	Timeframe will be established if quality assurance plan is adopted.
5. Present findings to the management team.	Management Analyst	Timeframe will be established if quality assurance plan is adopted.

Objective 3: Determine if the services that are being provided to families and children are effectively insuring that the family will be re-united or that permanency will be established.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Track the selected cases using the placement data available to determine which children are returning home, which are moving into other permanent homes and which are remaining in foster care.	CAPS Project Coordinator	Timeframe will be established if quality assurance plan is adopted.
2. Interview social work staff regarding cases that seem to be stalled and/or movement of cases.	Quality Assurance Team	Timeframe will be established if quality assurance plan is adopted.
3. Prepare and present regular reports to the management team and supervisors regarding the findings with regards to the movement of the cases through the system.	Management Analyst	Timeframe will be established if quality assurance plan is adopted.
4. Make recommendations for increasing permanency.	The Management Team	Timeframe will be established if quality assurance plan is adopted.
5. Prepare final report and present to the management team.	Management Analyst	Timeframe will be established if quality assurance plan is adopted.

Objective 4: Conduct a survey of Foster Care Review Committees to determine the extent to which they understand their roles and the effectiveness with which they fulfill their responsibilities.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Prepare a survey instrument to be used and present it to the management team.	Quality Assurance Team	Timeframe will be established if quality assurance plan is adopted.
2. Mail survey to chairpersons of FCRC's.	Central Office	Timeframe will be established if quality assurance plan is adopted.
3. Analyze information contained in surveys.	Management Analyst	Timeframe will be established if quality assurance plan is adopted.
4. Interview a sample of social work staff and District Court Judges to determine the effectiveness of the FCRC's.	Quality Assurance Team	Timeframe will be established if quality assurance plan is adopted.
5. Prepare a report of combined data and information and present to the management team	Management Analyst	Timeframe will be established if quality assurance plan is adopted.

Certification Regarding Lobbying

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

MT. DEPT. OF FAMILY SERVICES
Organization

Hank Hudson DIRECTOR JUNE 28, 1995
Authorized Signature Title Date

Certification Regarding Debarment, Suspension, and Other Responsibility Matters - Primary Covered Transactions

By signing and submitting this proposal, the applicant, defined as the primary participant in accordance with 45 CFR Part 76, certifies to the best of its knowledge and belief that it and its principals:

(a) are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal Department or agency;

(b) have not within a 3-year period preceding this proposal been convicted of or had a civil judgment rendered against them for obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property.

(c) are not presently indicated or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (2)(b) of this certification; and

(d) have not within a 3-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.

The inability of a person to provide the certification required above will not necessarily result in denial of participation in this covered transaction. If necessary, the prospective participate shall submit an explanation of why it cannot provide the certification. The certification or explanation will be considered in connection with the Department of Health and Human Services' (HHS) determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.

The prospective primary participant agrees that by submitting this proposal, it will include the clause entitled "Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion - Lower Tier Covered Transactions" provided below without modification in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

MT. DEPT. OF FAMILY SERVICES
ORGANIZATION

Director June 28, 1995

Authorized Signature Title Date

Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - Lower Tier Covered Transactions
(To Be Supplied to Lower Tier Participants)

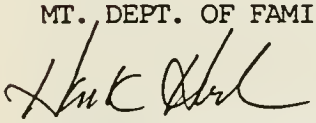
By signing and submitting this lower tier proposal, the prospective lower tier participant, as defined in 45 CFR Part 76, certifies to the best of its knowledge and belief that it and its principals:

(a) are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.

(b) where the prospective lower tier participant is unable to certify to any of the above, such prospective participant shall attach an explanation to this proposal.

The prospective lower tier participant further agrees by submitting this proposal that it will include this clause entitled "Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion - Lower Tier Covered Transactions" without modification in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

MT. DEPT. OF FAMILY SERVICES



Director June 28, 1995

Authorized Signature Title Date

CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE

Public Law 103-227, Part C - Environmental Tobacco Smoke, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, education, or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law does not apply to children's services provided in private residences, facilities funded solely by Medicare or Medicaid funds, and portions of facilities used for inpatient drug or alcohol treatment. Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to $1000 per day and/or the imposition of an administrative compliance order on the responsible entity.

By signing and submitting this application the applicant/grantee certifies that it will comply with the requirements of the Act. The applicant/grantee further agrees that it will require the language of this certification be included in any subawards which contain provisions for children's services and that all subgrantees shall certify accordingly.

MT. DEPT. OF FAMILY SERVICES

Director June 28, 1995

Authorized Signature Title Date

U.S. Department of Health and Human Services

Certification Regarding Drug-Free Workplace Requirements

Grantees Other Than Individuals

By signing and/or submitting this application or grant agreement, the grantee is providing the certification set out below.

This certification is required by regulations implementing the Drug-Free Workplace Act of 1988, 45 CFR Part 76, Subpart F. The regulations, published in the May 25, 1990 Federal Register, require certification by grantees that they will maintain a drug-free workplace. The certification set out below is a material representation of fact upon which reliance will be placed when the Department of Health and Human Services (HHS) determines to award the grant. If it is later determined that the grantee knowingly rendered a false certification, or otherwise violates the requirements of the Drug-Free Workplace Act, HHS, in addition to any other remedies available to the Federal Government, may taken action authorized under the Drug-Free Workplace Act. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of grants, or governmentwide suspension or debarment.

Workplaces under grants, for grantees other than individuals, need not be identified on the certification. If known, they may be identified in the grant application. If the grantee does not identify the workplaces at the time of application, or upon award, if there is no application, the grantee must keep the identity of the workplace(s) on file in its office and make the information available for Federal inspection. Failure to identify all known workplaces constitutes a violation of the grantee's drug-free workplace requirements.

Workplace identifications must include the actual address of buildings (or parts of buildings) or other sites where work under the grant takes place. Categorical descriptions may be used (e.g., all vehicles of a mass transit authority or State highway department while in operation, State employees in each local unemployment office, performers in concert halls or radio studios.)

If the workplace identified to HHS changes during the performance of the grant, the grantee shall inform the agency of the change(s), if it previously identified the workplaces in question (see above).

Definitions of terms in the Nonprocurement Suspension and Debarment common rule and Drug-Free Workplace common rule apply to this certification. Grantees' attention is called, in particular, to the following definitions from these rules:

"Controlled substance" means a controlled substance in Schedules I through V of the Controlled Substances Act (21 USC 812) and as further defined by regulation (21 CFR 1308.11 through 1308.15).

"Conviction" means a finding of guilt (including a plea of nolo contendere) or imposition of sentence, or both, by any judicial body charged with the responsibility to determine violations of the Federal or State criminal drug statutes;

"Criminal drug statute" means a Federal or non-Federal criminal statute involving the manufacture, distribution, dispensing, use, or possession of any controlled substance;

"Employee" means the employee of a grantee directly engaged in the performance of work under a grant, including: (i) All "direct charge" employees; (ii) all "indirect charge" employees unless their impact or involvement is insignificant to the performance of the grant; and, (iii) temporary personnel and consultants who are directly engaged in the performance of work under the grant and who are on the grantee's payroll. This definition does not include workers not on the payroll of the grantee (e.g., volunteers, even if used to meet a matching requirement; consultants or independent contractors not on the grantee's payroll; or employees of subrecipients or subcontractors in covered workplaces).

The grantee certifies that it will or will continue to provide a drug-free workplace by:

(a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;

(b) Establishing an ongoing drug-free awareness program to inform employees about:

(1) The dangers of drug abuse in the workplace; (2) The grantee's policy of maintaining a drug-free workplace; (3) Any available drug counseling, rehabilitation, and employee assistance programs; and, (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

(c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);

(d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will:

(1) Abide by the terms of the statement; and, (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

(e) Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

(Continued on reverse side of this sheet)

HHS—Certification Regarding Drug-Free Workplace Requirements—continued from reverse page

(f) Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted:

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or, (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

(g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e) and (f).

The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant (use attachments, if needed):

Place of Performance (Street address, City, County, State, ZIP Code) 48 N. Last Chance Gulch, Helena, Montana 59601 (Lewis and Clark County)

Check ___ if there are workplaces on file that are not identified here.

MT. DEPT. OF FAMILY SERVICES

Director June 28, 1995

Authorized Signature Title Date

DEPARTMENT OF
PUBLIC HEALTH AND HUMAN SERVICES

MARC RACICOT
GOVERNOR

PETER S. BLOUKE, PhD
DIRECTOR

STATE OF MONTANA

(406) 444-5900
FAX (406) 444-5956

PO BOX 8005
HELENA, MONTANA 59604-8005

August 29, 1995

TO: Judee Filip/Lorainne McLagan
ACF/Department Of Health & Human Services

FROM: Doug Matthies, Budget Officer
Family Services Program

RE: Budget Forms - Montana Five Year Plan

Following are our responses to the questions submitted regarding the financial forms submitted with the five year plan. We have changed the forms and provided further explanation where necessary.

1) The level of spending will be documented on the Statewide Budgeting & Accounting System(SBAS) by using separate responsibility centers (cost centers)for the necessary detail - family preservation services, family support services, administration and training. The responsibility centers are also used to document costs by funding sources - state funds private funds and federal grant funds. Pages 7 & 8 of the plan describe the currently funded efforts for family preservation and family support services as the partnership project. The partnership project will be used as the base for the state's maintenance of effort with costs recorded on SBAS.

2) Page 6 includes the assurance that federal funds will not be used to provide the 25% match.

3) The matching funds for the family preservation and family support services will be provided by the local contractors with non-federal funds. The contractors will document these amounts on their monthly reimbursement claims. The state match for administration and training will be provided by state general funds and documented on SBAS as being charged to the grant.

4) The CFS-101 Part I Supplement has been corrected to report the correct match amounts for FY95 & FY96. It also shows that the administrative costs are not budgeted at the full 10% allowed for the grants.

5-a) The totals have been adjusted to report in thousands and have been rounded to the nearest thousand.

5-b) The addition for column (a) has been corrected.

5-c) The percentages for line 8 column (b) have been included.

5-d&e)The amounts reported for CAPTA and ILP services was revised to reflect our current grant awards for the state CAN grant of 111,638 (column c), Baby Doe grant 22,386 (column d), and ILP 244,189 (column e).

5-f) The IV-E column (f) has been revised to reflect quarterly reports and estimates.

5-g) The amounts in column (h) reflect the IV-A emergency assistance expenditures for family services. The amounts should be included in the IV-A expenditure report prepared by SRs for FY95. There may be a delay in reporting these costs.

5-h) We have attached a summary detailing the other federal funds and local and state funds reported in columns (I) and (j).

The FY96 report has also been corrected for the above questions.

6) The specific percentage of funds the State will spend for family preservation and family support services are indicated on line 8 column (b). Pages 13 & 14 of section II of the plan describe how the amounts were determined. A specific amount for each service was not pre-determined, rather the funds were allocated to each region based on population and then the individual grant amounts and services to be provided were based on the needs assessments performed in the regions. The awards were reviewed to ensure that at least 25% of the total was allocated to each service.

Please let me know if you need additional information.

Department of Health and Human Services
Administration for Children and Families

OMB approval # 0980-0047
Approved through 3/31/96

ANNUAL BUDGET REQUEST FOR TITLE IV-B, SUBPART 1 FUNDS
FISCAL YEAR 1995
OCTOBER 1, 1994 through SEPTEMBER 30, 1995

Submission:
XX New
11 Revision

PART I

1. STATE or ITO MONTANA 2. EIN 810-3024274
3. ADDRESS:
Dept. Of Family Services
PO Box 8005
Helena MT 59604

A. COMPUTATION OF FEDERAL GRANT AWARD	STATE	INDIAN TRIBAL ORGANIZATION
1) Total estimated Title IV-B, subpart 1 expenditures:	1,626,018	
2) Total Federal Share :	1,219,514	
a) Allotment	1,219,514	
b) Reallotment		

Funds totaling more than the State's share of the $ 141 million allotment will not be released to the State unless the State meets the conditions of Section 427 of the Social Security Act.

B. CERTIFICATION BY STATE AGENCY

The State agency or Indian Tribal Organization submits the above estimate and request of grant award under title IV-B of the Social Security Act and agrees that the estimated expenditures will be made in accordance with the Child Welfare Services Plan, which has been jointly developed with the ACF Regional Office and has been determined to meet all the requirements of the Act, for the Fiscal Year ending September 30.

(Signature) Administrator, Title IV-B Agency or Authorized Official, ITO	RECEIVED
(Title--please type) Director- DFS	
Date Submitted Revised 6/30/95 8/30/95	DATE

OMB Approval # 0980-0047
Approved through 3/31/96

ANNUAL BUDGET REQUEST FOR TITLE IV-B, SUBPART 2 FUNDS
FAMILY PRESERVATION AND FAMILY SUPPORT

FISCAL YEAR 19 95

PART I SUPPLEMENT

1. State or ITO: MONTANA	2. EIN: 810-3024274
3. Address: Department of Family Services PO Box 8005 Helena MT 59604	

4. ESTIMATED TITLE IV-B, SUBPART 2 FUNDS	STATE/ITO	FEDERAL
a) Family Preservation Services	38,757	116,270
b) Family Support Services	61,649	184,946
c) Total Amount for Services	100,406	301,216
d) Total Amount for Administrative Costs	6,295	18,885
e) Total State and Federal Funds		426,802
f) Total Federal Funds		320,101

5. CERTIFICATION BY STATE AGENCY

The State agency or Indian Tribal Organization submits the above estimate and request of funds under title IV-B, subpart two, of the Social Security Act and agrees that the estimated expenditures will be made in accordance with the Child and Family Services Plan, which has been jointly developed with the ACF Regional Office and has been determined to meet all the requirements of the Act, for the Fiscal Year ending September 30.

Signature of State Agency Official	Signature of ACF Regional Official
Title Director, Montana CFS	Title
Date Submitted 6/30/95 Revised 8/30/95	Date

NUAL SUMMARY OF CHILD AND FAMILY SERVICES

ER 1, 1994 TO SEPTEMBER 30, 19 95 DUE JUNE 30, 1995

OMB APPROVAL # 0980-0047
Approved through 3/31/96

ICES/ACTIVITIES	ESTIMATED EXPENDITURES BY PROGRAM (IN THOUSANDS)										(k) NUMBER TO BE SERVED [ ] Families [ ] Individuals	(l) POP. TO BE SERVED	(m) GEOG. AREA TO BE SERVED
	TITLE IV-B		CAPTA*		(e) ILP*	(f) TITLE IV-E	(g) TITLE XX (SSBG)	(h) TITLE IV-A (EA)	(i) OTHER FED PROG.	(j) STATE LOCAL DONATED FUNDS			
	(a) I-CWS	(b) II-FPS	(c) I	(d) II									
ION & SUPPORT SERVICES Support)		171	92	22	244			1,224	4,256	3,308	430 fam		
IVE SERVICES	474								200	2,096	13,498 (fy94)	Reports of abuse/neglect	Statewide
INTERVENTION ; Preservation)		102								487			
EPLACEMENT PREVENTION	237										430 fam		
UNIFICATION SERVICES	237										1,178 (6/30/94)	All children in foster care	Statewide
CARE MAINTENANCE: STER FAMILY & RELATIVE STER CARE	272					1,875		249		4,782	3,580 (fy94)	All eligible children	Statewide
OUP/INSTITUTIONAL CARE						2,292		305		5,845	998 (fy94)		
ON SUBSIDY PMTS.						591				478	318 (fy94)		Statewide
STRATION & MANAGEMENT						6,664				2,376			
10% ADMIN. COST		19											
ICANT PORTION		FF37, F:63											
TRAINING		28	20							80			
PARENT TRAINING & TMENT													
VE PARENT TRAINING & TMENT													
CARE RELATED TO MENT/TRAINING													
	1,220	320	112	22	244	11,422	0	1,778	4,456	19,452			

ly, Indian Tribes are not required to include information on these programs

al Programs: Attached

80,000

(7) State Funds For Training

FY 95

PART II: ANNUAL SUMMARY OF CHILD & FAMILY SERVICES

LINE	COLUMNS:	(i) OTHER FEDERAL	(j) STATE & LOC
(1)	Big Brothers/Sisters		182,000
	Alcohol & Drug Treatment		213,000
	Children's Trust Fund		54,000
	Challenge Grant	34,000	
	Children's Justice Act	60,000	
	Crisis Nursery Grant (10%)	20,000	
	Partnership Project (63%)		804,000
	IV-B Part II Local Match(63%)		63,000
	CWS Social Work Activity		1,188,000
	Day Care Block Grant	2,935,959	
	Day Care Title IV-A At-Risk	915,000	383,000
	Dependent Care Grant	50,000	
	Protective Services Day Care -IV-A	241,000	421,000
	Total	4,255,959	3,308,000
(2)	Domestic Violence	200,000	145,000
	Family Based Services		763,000
	CWS Social Work Activity		1,188,000
	Total	200,000	2,096,000
(3)	Partnership Project (37%)		450,000
	IV-B Part II Local Match(37%)		37,000
	Total		487,000
(4) - (a)	Foster Care Maintence -CWS		2,691,000
	CWS Social Work Activity		1,068,750
	IV-A Match		249,000
	IV-E Match		773,046
	Total		4,781,796
(4) - (b)	Foster Care Maintence -CWS		3,289,000
	CWS Social Work Activity		1,306,250
	IV-A Match		305,000
	IV-E Match		944,835
	Total		5,845,085
(5)	State Paid Adoptions & IV-E Match		478,000
(6)	State & Local Admin		2,376,000
(7)	State Funds For Training		80,000

Department of Health and Human Services
Administration for Children and Families

OMB approval # 0980-0047
Approved through 3/31/96

ANNUAL BUDGET REQUEST FOR TITLE IV-B, SUBPART 1 FUNDS
FISCAL YEAR 1996
OCTOBER 1, 1995 through SEPTEMBER 30, 1996

Submission:
X New
Revision

PART I

1. STATE or ITO Montana
2. EIN 810-3024274
3. ADDRESS:
Dept of Family Services
PO Box 8005
Helena MT 59604

A. COMPUTATION OF FEDERAL GRANT AWARD	STATE	INDIAN TRIBAL ORGANIZATION
1) Total estimated Title IV-B, subpart 1 expenditures:	1,789,333	
2) Total Federal Share :	1,342,000	
a) Allotment	1,342,000	
b) Reallotment		

Funds totaling more than the State's share of the $ 141 million allotment will not be released to the State unless the State meets the conditions of Section 427 of the Social Security Act.

B. CERTIFICATION BY STATE AGENCY

The State agency or Indian Tribal Organization submits the above estimate and request of grant award under title IV-B of the Social Security Act and agrees that the estimated expenditures will be made in accordance with the Child Welfare Services Plan, which has been jointly developed with the ACF Regional Office and has been determined to meet all the requirements of the Act, for the Fiscal Year ending September 30.

(Signature) Administrator, Title IV-B Agency or Authorized Official, ITO	RECEIVED
(Title--please type) Director - DFS	
Date Submitted 6/30/95 Revised 8/30/95	DATE

CFS-101 Part I

OMB Approval # 0980-004
Approved through 3/31/9

ANNUAL BUDGET REQUEST FOR TITLE IV-B, SUBPART 2 FUNDS
FAMILY PRESERVATION AND FAMILY SUPPORT

FISCAL YEAR 19 96

PART I SUPPLEMENT

1. State or ITO: MONTANA	2. EIN: 810-3024274
3. Address: Department of Family Services PO Box 8005 Helena MT 59604	

4. ESTIMATED TITLE IV-B, SUBPART 2 FUNDS	STATE/ITO	FEDERAL
a) Family Preservation Services	58,134	174,405
b) Family Support Services	92,473	277,419
c) Total Amount for Services	150,607	451,824
d) Total Amount for Administrative Costs	9,927	29,781
e) Total State and Federal Funds		642,139
f) Total Federal Funds		481,605

5. CERTIFICATION BY STATE AGENCY

The State agency or Indian Tribal Organization submits the above estimate and request of funds under title IV-B, subpart two, of the Social Security Act and agrees that the estimated expenditures will be made in accordance with the Child and Family Services Plan, which has been jointly developed with the ACF Regional Office and has been determined to meet all the requirements of the Act, for the Fiscal Year ending September 30.

Signature of State Agency Official	Signature of ACF Regional Official
Title Director, Momtana Family Serv	Title
Date Submitted 6/30/95 Revised 8/30/95	Date

ART II: ANNUAL SUMMARY OF CHILD AND FAMILY SERVICES

OMB APPROVAL # 0980-0047
Approved through 3/31/96

or FY OCTOBER 1, 19 95 TO SEPTEMBER 30, 19 96 DUE JUNE 30, 19 95

SERVICES/ACTIVITIES	ESTIMATED EXPENDITURES BY PROGRAM (IN THOUSANDS)										(k) NUMBER TO BE SERVED [ ] Families [ ] Individuals	(l) POP. TO BE SERVED	(m) GEOG. AREA TO BE SERVED
	TITLE IV-B		CAPTA*		(e) ILP*	(f) TITLE IV-E	(g) TITLE XX (SSBG)	(h) TITLE IV-A (EA)	(i) OTHER FED PROG.	(j) STATE/ LOCAL DONATED FUNDS			
	(a) I-CWS	(b) II-FPS	(c) I	(d) II									
1) PREVENTION & SUPPORT SERVICES (Family Support)		277	92	22	244			1,224	4,426	3,474	288 fam 225 ind		
2) PROTECTIVE SERVICES	521								200	2,180	14,173 (est)	Reports of abuse/neglect	Statewide
3) CRISIS INTERVENTION (Family Preservation)		175								450	35		
(a) PREPLACEMENT PREVENTION	274										see above		
(b) REUNIFICATION SERVICES	275										1800 (est)	All children in foster care	Statewide
4) FOSTER CARE MAINTENANCE: (a) FOSTER FAMILY & RELATIVE FOSTER CARE	272					1,875		249		4,782	4930 (est)	All eligible children	Statewide
(b) GROUP/INSTITUTIONAL CARE						2,292		305		5,845	1050 (est)		
5) ADOPTION SUBSIDY PMTS.						591				478	334 (est)		Statewide
6) ADMINISTRATION & MANAGEMENT						6,664				2,376			
7) FP/FS 10% ADMIN. COST		30											
8) SIGNIFICANT PORTION		[illegible]											
9) STAFF TRAINING			20							80			
10) FOSTER PARENT TRAINING & RECRUITMENT													
11) ADOPTIVE PARENT TRAINING & RECRUITMENT													
12) CHILD CARE RELATED TO EMPLOYMENT/TRAINING													
13) TOTAL	1,342	482	112	22	244	11,422	0	1,778	4,626	19,665			

* States Only, Indian Tribes are not required to include information on these programs

Other Federal Programs: _____

FY 96

PART II: ANNUAL SUMMARY OF CHILD & FAMILY SERVICES

LINE	COLUMNS:	(i) OTHER FEDERAL	(j) STATE & LOC
(1)	Big Brothers/Sisters		182,000
	Alcohol & Drug Treatment		161,000
	Children's Trust Fund		54,000
	Challenge Grant	34,000	
	Children's Justice Act	60,000	
	Crisis Nursery Grant (90%)	190,000	
	Partnership Project (69%)		897,000
	IV-B Part II Local Match(69%)		104,190
	CWS Social Work Activity		1,272,000
	Day Care Block Grant	2,935,959	
	Day Care Title IV-A At-Risk	915,000	383,000
	Dependent Care Grant	50,000	
	Protective Services Day Care -IV-A	241,000	421,000
	Total	4,425,959	3,474,190
(2)	Domestic Violence	200,000	145,000
	Family Based Services		763,000
	CWS Social Work Activity		1,272,000
	Total	200,000	2,180,000
(3)	Partnership Project (31%)		403,000
	IV-B Part II Local Match(31%)		46,810
	Total		449,810
(4) - (a)	Foster Care Maintence -CWS		2,691,000
	CWS Social Work Activity		1,068,826
	IV-A Match		249,000
	IV-E Match		773,046
	Total		4,781,872
(4) - (b)	Foster Care Maintence -CWS		3,289,000
	CWS Social Work Activity		1,306,342
	IV-A Match		305,000
	IV-E Match		944,835
	Total		5,845,177
(5)	State Paid Adoptions & IV-E Match		478,000
(6)	State & Local Admin		2,376,000
(7)	State Funds For Training		80,000

[redacted] HUMAN SERVICES [redacted] CHILDREN AND FAMILIES

Region VIII
Federal Office Building
1961 Stout Street
Denver, CO 80294-3538

SEP 28 1994 .

Mr. Henry Hudson
Executive Director
Montana Department of Family Services
P.O. Box 8005
Helena, MT 59604

September 26, 1994

Re: Child Abuse and Neglect State Grant - Part I

The fiscal year 1994 grant award listed below is available for expenditures made in accordance with your approved application under the Child Abuse Prevention and Treatment Act, as amended (42 U.S.C. 5101) for the period beginning September 26, 1994 and ending September 26, 1999. The period of time in which these funds must be obligated is eighteen (18) months from the date of this award (March 26, 1996). An amount equal to funds not obligated within the 18-month period will be subtracted from the subsequent grant award unless an extension of time is granted by the Assistant Secretary. In addition, all obligations must be liquidated by September 26, 1999. A negative grant award will be issued for funds that are not liquidated by that date.

Cash Support This Award $ 111,638.00

This grant award includes supplemental funds which were available for distribution from the tentative allocations for those States which are not being awarded grant funds and from the redistribution of unobligated funds.

With the acceptance of this award, you agree to be responsible for timing the drawing of funds in accord with actual [illegible]diate cash requirements and adhering to the enclosed terms and conditions. Further, you agree that when these funds [illegible] advanced to secondary recipients, you will be responsible for effectively controlling their use of cash in compliance with Federal requirements. Payments under this award will be made available through Smartlink, which is administered by the Departmental Payment Management System (PMS), Post Office Box 6021, Rockville, Maryland 20852, (301) 443-1250.

Any questions you may have in connection with this grant should be directed to Richard A. Roussel, Assistant Regional Administrator, Office of Financial Operations, Department of Health and Human Services, Administration for Children and Families, Federal Office Building, 1961 Stout St., 9th Floor, Denver, CO 80294, (303) 844-2011.

Please transmit the attached copy of this letter to the official authorized to request funds covered by this award notice.

Sincerely,

Frank Fajardo
Regional Administrator

Enclosure

OBLIGATION DATA

APPROPRIATION: 7541536 CAN: 4-G082372 GRANT/DOCUMENT NO.: G-9401MTCA01

FISCAL YEAR: 1994 ALLOTMENT: $ 111,638 EIN: 1-810-302-402-Z4

[redacted] UMAN SERVICES

ADMINISTRATION FOR [redacted]

Region VIII
Federal Office Building
1961 Stout Street
Denver, CO 80294-3538

SEP 2 S 1994

Mr. Henry Hudson
Executive Director
Montana Department of Family Services
P.O. Box 8005
Helena, MT 59604

September 26, 1994

Re: Child Abuse and Neglect State Grant - Part II

The fiscal year 1994 grant award listed below is available for expenditures made in accordance with your approved application under the Child Abuse Prevention and Treatment Act, as amended (42 U.S.C. 5101) for the period beginning September 26, 1994 and ending September 26, 1999. There is no requirement imposed with respect to the obligation of Part II funds; however, these funds must be liquidated by September 26, 1999. A negative grant award will be issued for funds that are not liquidated by that date.

Cash Support This Award $ 22,386.00

This grant award includes supplemental funds which were available for distribution from the redistribution of unobligated funds.

With the acceptance of this award, you agree to be responsible for timing the drawing of funds in accord with actual immediate cash requirements and adhering to the enclosed terms and conditions. Further, you agree that when these funds are advanced to secondary recipients, you will be responsible for effectively controlling their use of cash in compliance with Federal requirements. Payments under this award will be made available through Smartlink, which is administered by the Departmental Payment Management System (DPMS), Post Office Box 6021, Rockville, Maryland 20852, (301) 443-1250.

Any questions you may have in connection with this grant should be directed to Richard A. Roussel, Assistant Regional Administrator, Office of Financial Operations, Department of Health and Human Services, Administration for Children and Families, Federal Office Building, 1961 Stout St., 9th Floor, Denver, CO 80294, (303) 844-2011.

Please transmit the attached copy of this letter to the official authorized to request funds covered by this award notice.

Sincerely,

Richard A. Roussel

Frank Fajardo
Regional Administrator

Enclosure

OBLIGATION DATA

APPROPRIATION: 7541536	CAN: 4-G082372	GRANT/DOCUMENT NO.: G-9401MTCA02	
FISCAL YEAR: 1994	AMOUNT: $ 22,386	EIN: 1-810-302-402-Z4	

[redacted] & HUMAN SERVICES

Column-e

ADMINISTRATION FOR CHILDREN AND FAMILIES
370 L'Enfant Promenade, S.W.
Washington, D.C. 20447

Director
Department of Family Services
P.O. Box 8005
Helena, MT 59604

July 1, 1995

Dear Grantee:

The grant award listed below is available for obligation beginning October 1, 1994, and ending September 30, 1996, in accordance with your approved application under the Independent Living Program under Title IV-E of the Social Security Act, (42 U.S.C 677 et. seq.) and applicable Departmental regulations (45 Code of Federal Regulations Part 92 or 74). These funds must be liquidated by September 30, 1996.

Cash Support This Award	$ 61,047.00
Cash Support Previous Awards	$ 183,142.00
Total Awards to Date	$ 244,189.00
Remaining Allotment	$ 0.00

With the acceptance of this award, you agree to administer this grant in compliance with the terms and conditions set forth in the applicable Program Instruction, Departmental regulations, and OMB Circulars. You agree to minimize the time between the receipt of Federal funds and their disbursement and to submitting timely reports as required. Further, you agree that if and when funds are advanced to secondary recipients you will be responsible for effectively controlling their us of cash in compliance with Federal regulations.

Questions pertaining to payments should be directed to the HHS Division of Payment Management, Post Office Box 6021, Rockville, Maryland 20852, (301) 443-1250.

Fiscal reporting questions regarding this grant should be referred to the appropriate Regional Office of the Administration for Children and Families, Department of Health and Human Services.

Please transmit a copy of this letter to the official authorized to request funds covered by this award notice.

Betty J. Mobley
Acting Director
Division of Formula, Entitlement
and Block Grants

OBLIGATION DATA

Appropriation: 7551545	CAN: 5-G994415
Document No.: G9501-MT-1420	Fiscal Year: 1995
EIN: 1-810-302-402-Z4	Object Class: 41.15
Allotment: $ 244,189	CFDA: 93.674
Quarter Beginning: 07/01/95	

RECEIVED

Coleman G)

OCT 03 1994

DFS

ADMINISTRATION FOR CHILDREN AND FAMILIES
370 L'Enfant Promenade, S.W.
Washington, D.C. 20447

Director
Department of Family Services
P.O. Box 8005
Helena, Montana 59604-8005

September 29, 1994

The grant award listed below is available for expenditures made in accordance with Section 204 of Title II of the Child Abuse Prevention and Treatment Act (Community-Based Child Abuse and Neglect Prevention Grants). These funds must be obligated and liquidated by September 29, 1996. A negative grant award will be issued for any unobligated balances or unliquidated obligations reported as of September 29, 1996.

CASH SUPPORT THIS AWARD $ 34,135.00

With the acceptance of this award, you agree to be responsible for timing the drawing of funds in accord with actual immediate cash requirements and adhering to the enclosed terms and conditions. Further, you agree that when these funds are advanced to secondary recipients, you will be responsible for effectively controlling their use of cash in compliance with Federal requirements. Payments under this award will be made available through Smartlink, which is administered by the Departmental Payment Management System (PMS), Post Office Box 6021, Rockville, Maryland 20852, (301) 443-1250.

Any questions you may have in connection with this grant should be directed to Bettye J. Mobley, Administration for Children and Families, (202) 401-6955.

Please transmit the attached copy of this letter to the Official authorized to request funds covered by this award notice.

Sincerely,

Olivia A. Golden
Commissioner
Administration on Children, Youth and Families

Enclosure

OBLIGATION DATA

APPROP: 754 / 1536	CAN: 4-G994140	DOC. NO. G-9401MTCAPG
FISCAL YEAR 1994	ALLOT: $ 34,135	EIN: 1-810-302-402-Z4

Column 1

[redacted] DEPARTMENT OF HEALTH & HUMAN SERVICES [redacted]

NOTICE OF GRANT AWARD - FY 1994
CHILD CARE AND DEVELOPMENT BLOCK GRANT PROGRAM

ADMINISTRATION FOR CHILDREN AND FAMILIES
370 L'Enfant Promenade, S.W.
Washington, D.C. 20447

RECEIVED
OCT 03 1994
DFS

HANK HUDSON, DIRECTOR
MONTANA DEPARTMENT OF FAMILY SERVICES
P.O. BOX 8005
HELENA, MONTANA 59604

SEP 30 1994

DEAR GRANTEE:

THIS GRANT AWARD REPRESENTS THE ANNUAL ALLOCATION TO THE STATE FOR FISCAL YEAR 1994 FOR THE CHILD CARE AND DEVELOPMENT BLOCK GRANT PROGRAM. THESE FUNDS ARE MADE AVAILABLE UNDER THE CHILD CARE AND DEVELOPMENT BLOCK GRANT ACT OF 1990, (THE ACT) AS ENACTED BY SECTION 5082 OF THE OMNIBUS BUDGET RECONCILIATION ACT OF 1990, PUBLIC LAW 101-508.

CHILD CARE AND DEVELOPMENT.....$2,935,959
CUMULATIVE ALLOCATION.....$2,935,959
EIN.....1-81-030-2402-Z4
APPROPRIATION.....7541515
CAN.....4G999002
DOCUMENT NUMBER.....G94B1MTCARE
CFDA NUMBER.....93.575
GRANT PERIOD.....09/30/94-09/30/97

THIS AWARD PROVIDES FEDERAL FUNDS FOR EXPENDITURES MADE IN ACCORDANCE WITH APPLICABLE STATUTES AND REGULATIONS, YOUR ASSURANCES AND PLAN SUBMITTED IN ACCORDANCE WITH SECTION 45 CFR PARTS 98 AND 99, AND THE LAWS AND PROCEDURES APPLICABLE TO THE EXPENDITURE OF STATE FUNDS. DETERMINATIONS AS TO WHETHER THE STATE HAS COMPLIED WITH THESE REQUIREMENTS MAY BE MADE AS THE RESULT OF THE AUDIT REQUIRED BY SECTION 658K(B) OF THE ACT AND THE SINGLE AUDIT ACT OF 1984, OR AS THE RESULT OF REVIEWS CONDUCTED UNDER SECTION 658I(B) OF THE ACT. AS REQUIRED BY SECTION 45 CFR PART 98.64, A FINANCIAL REPORT MUST BE SUBMITTED 90 DAYS AFTER THE END OF EACH FISCAL YEAR IN THE GRANT PERIOD, WITH THE FIRST REPORT BEING DUE 15 MONTHS AFTER THE BEGINNING OF THE GRANT PERIOD. THE STATE HAS UNTIL THE END OF THE GRANT PERIOD TO LIQUIDATE OBLIGATIONS. ANY FUNDS RECEIVED THROUGH THIS AWARD WHICH ARE IMPROPERLY SPENT ARE SUBJECT TO THE ASSESSMENT OF INTEREST UNDER 45 CFR PART 30.

PAYMENTS UNDER THIS GRANT WILL BE GOVERNED BY 31 U.S.C. 6503(A). INQUIRIES REGARDING PAYMENT OF FUNDS UNDER THIS GRANT SHOULD BE DIRECTED TO THE HHS FEDERAL ASSISTANCE FINANCING BRANCH, P.O. BOX 6021, ROCKVILLE MARYLAND 20852, PHONE: (301) 443-1250. PLEASE REFER ANY OTHER QUESTIONS ABOUT THIS GRANT TO JOSEPH LONERGAN AT (202) 401-6603.

SINCERELY YOURS,

OLIVIA A. GOLDEN
COMMISSIONER
ADMINISTRATION FOR CHILDREN, YOUTH AND FAMILIES

DEPARTMENT OF HEALTH & HUMAN SERVICES

Column (i)

RECEIVED
MAY - 8 1995
DFS

ADMINISTRATION FOR CHILDREN AND FAMILIES
370 L'Enfant Promenade, S.W.
Washington, D.C. 20447

Department of Family Services
Domestic Violence Program
Post Office Box 8005
Helena, Montana 59604

May 3, 1995

The grant award listed below is available for expenditures made in accordance with your approved application under the Family Violence Prevention and Services Act (42 USC 10401) for the period beginning October 1, 1994, and ending September 30, 1996:

CASH SUPPORT THIS AWARD	$	200,000.00
CASH SUPPORT PREVIOUS AWARDS	$	0.00
TOTAL AWARDS TO DATE	$	200,000.00

With the acceptance of this award, you agree to be responsible for limiting the drawing of funds to the actual time of disbursement and to submitting timely reports as required. Withdrawals of funds are not to exceed the total grant shown above. Failure to adhere to these requirements may cause the suspension of grant funds.

Federal funds to meet current disbursing needs may be drawn through Smartlink. Funds will be made available to grantees through the HHS Payment Management System (PMS), P. O. Box 6021, Rockville, Maryland 20852; telephone: (301) 443-1250.

Any questions regarding this grant should be referred to Bettye J. Mobley, Administration for Children and Families, Office of Financial Management, (202) 401-6955.

Please transmit a copy of this letter to the official authorized to request funds covered by this award notice.

Bettye J. Mobley
Acting Director, Divison of Formula,
Entitlement and Block Grants

OBLIGATION DATA

APPROP: 7551536	CAN: 5-G994707	DOC NO: G-9501-MTFVPS
FISCAL YEAR: 1995	ALLOT: $ 200,000	EIN: 1-81-030-2402-Z4

ACF(8/93)

APPENDICES

1. Partnership Project Summary of Project Sites -- April, 1995

2. Partnership Local Participants

3. Local and State Family Service Advisory Council Members

4. Family Preservation/Family Support Regional Efforts -- 1994-1995

    4.1 Region I Community Survey of Services
    4.2 North Central Regional Five-Year Plan Excerpts
    4.3 Blackfeet Tribe Proposal (Region II)
    4.4 Region III Request for Proposal
    4.5 Proposal from Lewistown
    4.6 Proposal from Columbus
    4.7 Region IV Advisory Council's Family Services Plan for 1995
    4.8 Region V Family Preservation and Family Support Five-Year Plan

5. Guiding Principles for Family Support Training

6. Multiple-Year Strategic Plan

7. Staff Training Assessment Survey Re: Family Support

8. Juvenile Corrections Division (JCD) Goals and Objectives

9. Sample Site Evaluation Plan; Projected "Evaluation Project Activities and Timelines" (March, 1995 - March, 1996); Summary of Testimony for Legislative Hearing; Forms List; and Form Completion Checklist

PARTNERSHIP TO STRENGTHEN FAMILIES' PROJECT

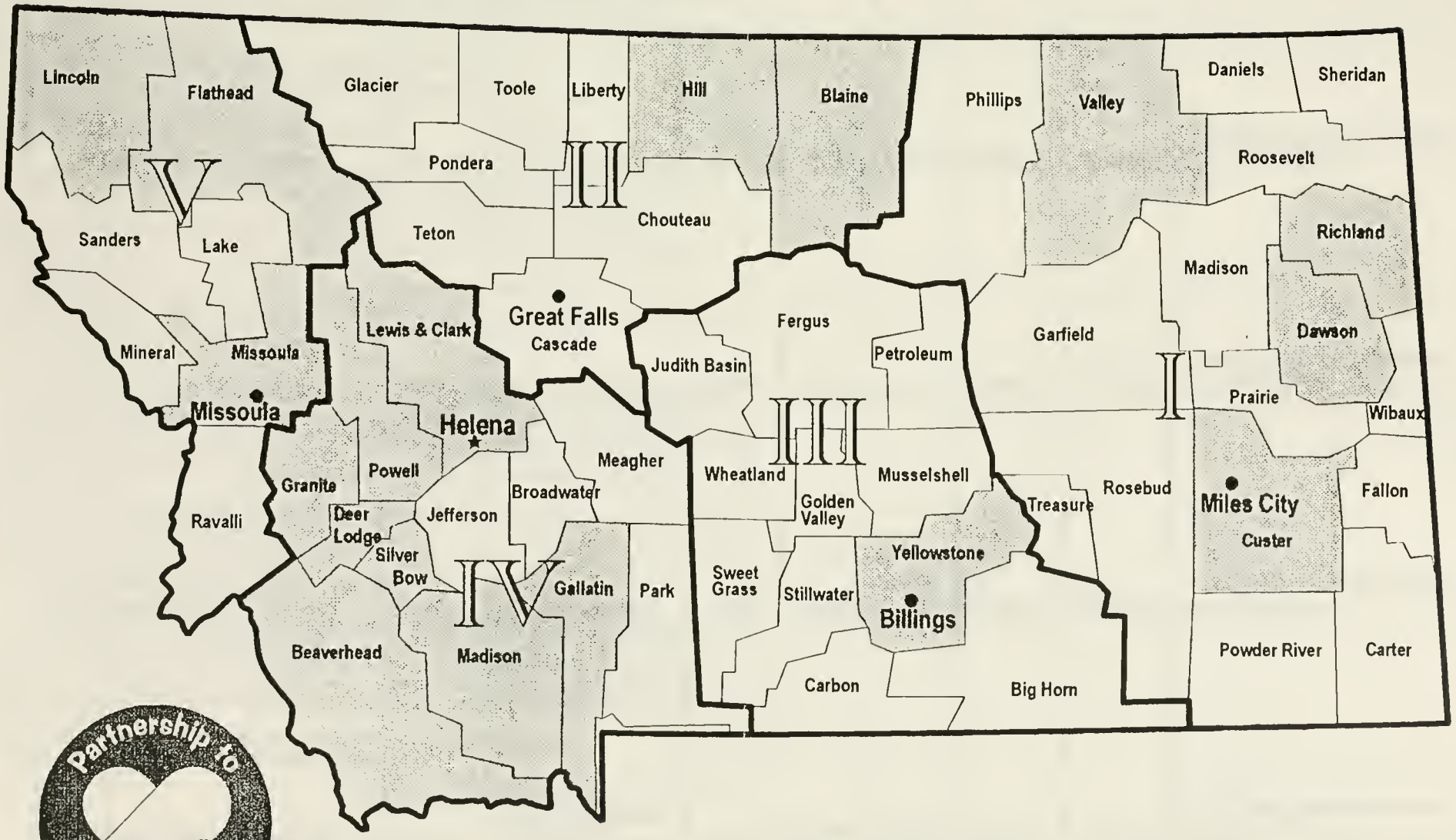
DEPARTMENT OF FAMILY SERVICES

SUMMARY OF PROJECT SITES

APRIL 1995

Montana Department of Family Services

Partnership to Strengthen Families



Partnership to Strengthen Families

Counties currently served by Partnership communities.

Region #	REGION	SITE	COUNTY	CONTRACTOR	Service START	Contract END	# of Families Served	Target Population	BUDGET	STAFFING
1	Eastern Montana	Miles City	Custer	Developmental Educational Assistance Program (DEAP)	1/1/95	6/30/95	20	prenatal - 5	$25,000.00	1.0 FTE Home Visitor Supervision provided by Contractor
1	Eastern Montana	Glendive	Dawson	Dawson County Health Department	1/1/95	6/30/95	20	prenatal - 5	$25,000.00	1.0 FTE Home Visitor Supervision provided by Contractor
1	Eastern Montana	Sidney	Richland	Hi-Line Home Programs, Inc.	1/1/95	6/30/95	20	prenatal - 5	$25,000.00	1.0 FTE Home Visitor Supervision provided by Contractor
1	Eastern Montana	Glasgow	Valley	Valley County Health Department	1/1/95	6/30/95	20	prenatal - 5	$25,000.00	1.0 FTE Home Visitor Supervision provided by Contractor

SERVICE DESCRIPTION
Provide a wide range of goal-directed services to families, including but not limited to: 1) teaching appropriate parenting skills; 2) family and individual communication skill-building; 3) teaching budgeting skills; 4) aiding the family in meeting medical needs, such as arranging for substance abuse treatment for family members, immunizations for children, etc., and making follow-up support resources available; 5) teaching the family housekeeping, homemaking and other organizational skills needed to provide a positive environment (e.g., modeling behavior such as assisting the family to clean the home); 6) referring and linking the family with needed concrete services (i.e. aiding the family in obtaining furniture, beds, etc.); 7) referring and linking the family with follow-up services when necessary; and 8) transporting or arranging for transporting the family.
Provide a wide range of goal-directed services to families, including but not limited to: 1) teaching appropriate parenting skills; 2) family and individual communication skill-building; 3) teaching budgeting skills; 4) aiding the family in meeting medical needs, such as arranging for substance abuse treatment for family members, immunizations for children, etc., and making follow-up support resources available; 5) teaching the family housekeeping, homemaking and other organizational skills needed to provide a positive environment (e.g., modeling behavior such as assisting the family to clean the home); 6) referring and linking the family with needed concrete services (i.e. aiding the family in obtaining furniture, beds, etc.); 7) referring and linking the family with follow-up services when necessary; and 8) transporting or arranging for transporting the family.
Provide a wide range of goal-directed services to families, including but not limited to: 1) teaching appropriate parenting skills; 2) family and individual communication skill-building; 3) teaching budgeting skills; 4) aiding the family in meeting medical needs, such as arranging for substance abuse treatment for family members, immunizations for children, etc., and making follow-up support resources available; 5) teaching the family housekeeping, homemaking and other organizational skills needed to provide a positive environment (e.g., modeling behavior such as assisting the family to clean the home); 6) referring and linking the family with needed concrete services (i.e. aiding the family in obtaining furniture, beds, etc.); 7) referring and linking the family with follow-up services when necessary; and 8) transporting or arranging for transporting the family.
Provide a wide range of goal-directed services to families, including but not limited to: 1) teaching appropriate parenting skills; 2) family and individual communication skill-building; 3) teaching budgeting skills; 4) aiding the family in meeting medical needs, such as arranging for substance abuse treatment for family members, immunizations for children, etc., and making follow-up support resources available; 5) teaching the family housekeeping, homemaking and other organizational skills needed to provide a positive environment (e.g., modeling behavior such as assisting the family to clean the home); 6) referring and linking the family with needed concrete services (i.e. aiding the family in obtaining furniture, beds, etc.); 7) referring and linking the family with follow-up services when necessary; and 8) transporting or arranging for transporting the family.

Region #	REGION	SITE	COUNTY	CONTRACTOR	Service START	Contract END	# of Families Served	Target Population	BUDGET	STAFFING
2	North Central Montana	Havre; Chinook, Rocky Boy & Ft Belknap Reservation	Hill; Blaine	Human Resource Development Council	11/1/94	6/30/95	60	prenatal - 5	$172,170.00	4 FTE Home Visitors (1 in Hill County, 1 in Blaine County, and 1 each on the two Reservations) 1 FTE Project Manager/Supervisor
3	South Central Montana	Billings	Yellowstone	Family Support Network	5/1/94	8/31/94		prenatal - 3 & referred to DFS	$6,000.00	.25 FTE Facilitator for 4 months .20 Grant Writer for 4 months
3	South Central Montana	Billings	Yellowstone	Family Support Network	10/1/94	8/31/95		prenatal - 3 & referred to DFS	$8,110.00	Administrative assistance (as required)
3	South Central Montana	Billings	Yellowstone	Family Support Network	12/1/95	8/31/95	50	referred to DFS	$115,317.00	2 FTE Home Visitors 2 .5 FTE Home Visitors 1 .5 FTE Supervisor
3	South Central Montana	Billings	Yellowstone	Family Tree - Billings Chapter NCPCA	12/20/94	9/30/95	15	prenatal - 3	$6,570.00	2 Group Co-Facilitators

SERVICE DESCRIPTION
Provide a wide range of goal-directed services to families, including but not limited to: 1) teaching appropriate parenting skills; 2) family and individual communication skill-building; 3) teaching budgeting skills; 4) aiding the family in meeting medical needs, such as arranging for substance abuse treatment for family members, immunizations for children, etc., and making follow-up support resources available; 5) teaching the family housekeeping, homemaking and other organizational skills needed to provide a positive environment (e.g., modeling behavior such as assisting the family to clean the home); 6) referring and linking the family with needed concrete services (i.e. aiding the family in obtaining furniture, beds, etc.); 7) referring and linking the family with follow-up services when necessary; 8) transporting or arranging for transporting the family; and 9) establishing formal commitments and systems of referral from agencies providing services to at-risk families.
Provide planning, technical assistance and proposal drafting for Yellowstone County Partnership Project.
Coordinate efforts of "birth-three" contractors, including data collection and child care allowance to placement group contract.
Provide a wide range of goal-directed services to families, including but not limited to: 1) teaching appropriate parenting skills; 2) family and individual communication skill-building; 3) teaching budgeting skills; 4) aiding the family in meeting medical needs, such as arranging for substance abuse treatment for family members, immunizations for children, etc., and making follow-up support resources available; 5) teaching the family housekeeping, homemaking and other organizational skills needed to provide a positive environment (e.g., modeling behavior such as assisting the family to clean the home); 6) referring and linking the family with needed concrete services (i.e. aiding the family in obtaining furniture, beds, etc.); 7) referring and linking the family with follow-up services when necessary; 8) transporting or arranging for transporting the family; and 9) providing neighborhood support groups in three high-risk neighborhoods in Billings.
Provide parent support/education group for families with children birth-3 years of age (fathers only).

Region #	REGION	SITE	COUNTY	CONTRACTOR	Service START	Contract END	# of Families Served	Target Population	BUDGET	STAFFING
3	South Central Montana	Billings	Yellowstone	Mother Share (through Head Start, Inc.)	12/20/94	9/30/95	15	prenatal - 3	$6,570.00	1 Group Facilitator
3	South Central Montana	Billings	Yellowstone	Parent Connection				prenatal - 3 & referred to DFS	$5,000.00	Library resources related to parent/family support and education
3	South Central Montana	Billings	Yellowstone	The Family Tree	2/1/95	6/30/95	12	prenatal - 3	$40,000.00	1 Home Visitor .125 Supervisor Parent Education Facilitators
3	South Central Montana	Billings	Yellowstone	Young Families Program	12/20/94	9/30/95	30	prenatal - 3	$13,140.00	2 Group Facilitators
4	Southwest	Butte	Silver Bow	Greater Butte Coordinated Child Care	11/1/94	7/31/95		prenatal - 3 & referred to DFS	$16,328.00	.5 FTE Coordinator (for 9 months)
4	Southwest Montana	Dillon	Beaverhead; Madison	Women's Resource Center	2/1/95	6/30/95	20	prenatal - 5 & referred to DFS	$44,740.00	2 FTE Home Visitors .5 Supervisor/Coordinator

SERVICE DESCRIPTION
Provide parent support/education group for Native American families with children birth-3 years of age.
Provide parenting materials to all Billings Partnership groups through library/resource room. Families served through referral from other programs.
Intensive home visiting to high risk families at the birth of children, in conjunction with Yellowstone City-County Health Department, and St. Vincent's Hospital and Health Center; and Parent education classes.
Provide parent support/education groups for: 1) prenatal/birth parents; and 2) teen parents with children under 3 years of age.
Provide coordination, planning, technical assistance and proposal drafting for Butte Partnerships Project ("Families First"). Number of families served to be determined through the planning process.
Provide a wide range of goal-directed services to families, including but not limited to: 1) teaching appropriate parenting skills; 2) family and individual communication skill-building; 3) teaching budgeting skills; 4) aiding the family in meeting medical needs, such as arranging for substance abuse treatment for family members, immunizations for children, etc., and making follow-up support resources available; 5) teaching the family housekeeping, homemaking and other organizational skills needed to provide a positive environment (e.g., modeling behavior such as assisting the family to clean the home); 6) referring and linking the family with needed concrete services (i.e. aiding the family in obtaining furniture, beds, etc.); 7) referring and linking the family with follow-up services when necessary; 8) transporting or arranging for transporting the family; 9) establishing prevention services in day care center; and 10) providing day care to families to attend parent education programs.

Region #	REGION	SITE	COUNTY	CONTRACTOR	Service START	Contract END	# of Families Served	Target Population	BUDGET	STAFFING
4	Southwest Montana	Anaconda	Deer Lodge	Anaconda PCA "Family Enrichment" Council	11/1/94	8/31/95	25	prenatal - 3 & referred to DFS	$50,000.00	.5 FTE Family Resource Coordinator .46 FTE In Home Skill Builder Life Skills Facilitator (7 sessions/month) Supervision provided jointly by Contractor and Deer Lodge Counth Health Deptartment
4	Southwest Montana	Bozeman	Gallatin	Gallatin City-County Health Department	1/1/95	6/30/95	15	prenatal - 3 & referred to DFS	$55,000.00	.6 FTE Social Worker 1 FTE Family Support Worker through Prevent Child Abuse, Inc.
4	Southwest Montana	Granite County	Granite	Child Start, Inc.	2/1/95	8/31/95	15	prenatal - 3 & referred to DFS	$24,700.00	.25 FTE Daycare Director .50 FTE Family Resource Director/Home Visitor Supervision provided by contractor
4	Southwest Montana	Greater Lewis & Clark County - Area	Lewis & Clark	Summit Project	3/1/95	2/28/96		referred to DFS	$54,957.00	1 FTE Research/Community Planning Project Coordinator 2 Researchers (15 hrs/wk for 24 wks)

SERVICE DESCRIPTION
Provide a wide range of goal-directed services to families, including but not limited to: 1) teaching appropriate parenting skills; 2) family and individual communication skill-building; 3) teaching budgeting skills; 4) aiding the family in meeting medical needs, such as arranging for substance abuse treatment for family members, immunizations for children, etc., and making follow-up support resources available; 5) teaching the family housekeeping, homemaking and other organizational skills needed to provide a positive environment (e.g., modeling behavior such as assisting the family to clean the home); 6) referring and linking the family with needed concrete services (i.e. aiding the family in obtaining furniture, beds, etc.); 7) referring and linking the family with follow-up services when necessary; and 8) transporting or arranging for transporting the family.
Provide a wide range of goal-directed services to families, including but not limited to: 1) teaching appropriate parenting skills; 2) family and individual communication skill-building; 3) teaching budgeting skills; 4) aiding the family in meeting medical needs, such as arranging for substance abuse treatment for family members, immunizations for children, etc., and making follow-up support resources available; 5) teaching the family housekeeping, homemaking and other organizational skills needed to provide a positive environment (e.g., modeling behavior such as assisting the family to clean the home); 6) referring and linking the family with needed concrete services (i.e. aiding the family in obtaining furniture, beds, etc.); 7) referring and linking the family with follow-up services when necessary; 8) transporting or arranging for transporting the family. 9) providing child care, education support, and scholarships to teen parents through Alternative High School Program; and 10) providing recreation opportunities, transportation, activity supplies, and child care through Monforton School.
Provide a wide range of goal-directed services to families, including but not limited to: 1) teaching appropriate parenting skills; 2) family and individual communication skill-building; 3) teaching budgeting skills; 4) aiding the family in meeting medical needs, such as arranging for substance abuse treatment for family members, immunizations for children, etc., and making follow-up support resources available; 5) teaching the family housekeeping, homemaking and other organizational skills needed to provide a positive environment (e.g., modeling behavior such as assisting the family to clean the home); 6) referring and linking the family with needed concrete services (i.e. aiding the family in obtaining furniture, beds, etc.); 7) referring and linking the family with follow-up services when necessary; 8) transporting or arranging for transporting the family; 9) establishing prevention services in day care center; and 10) providing day care to families to attend parent education programs.
Provide in-depth analysis of risks experienced by target population families, available services (including utilization review - i.e. how effective are those services in assisting target population families), gaps in services, and recommendations for expanded or new services. Number of families served to be determined through the planning process.

Region #	REGION	SITE	COUNTY	CONTRACTOR	Service START	Contract END	# of Families Served	Target Population	BUDGET	STAFFING
4	Southwest Montana	Deer Lodge	Powell	Child Start, Inc.	2/1/95	8/31/95	25	prenatal - 3 & referred to DFS	$25,300.00	.75 FTE Family Resource Director/Home Visitor Supervision provided by contractor
5	Western Montana	Kallspell	Flathead	Flathead Council for Families	1/1/95	6/30/95		prenatal - 3 & referred to DFS	$11,999.20	.5 FTE Coordinator (for 6 months)
5	Western Montana	Libby/Troy	Lincoln	Libby Community Interagencies, Inc.	12/1/94	6/30/95	50	prenatal - 3 & referred to DFS	$146,458.00	.5 FTE Home Visitor .5 FTE Community Coordinator .5 FTE Supervisor
5	Western Montana	Eureka	Lincoln	Nurturing Center	1/1/95	6/30/95	20	prenatal - 3 & referred to DFS	$30,831.00	1.0 FTE Resource Coordinator .5 FTE Home Visitor Supervision provided by Contractor

SERVICE DESCRIPTION
Provide a wide range of goal-directed services to families, including but not limited to: 1) teaching appropriate parenting skills; 2) family and individual communication skill-building; 3) teaching budgeting skills; 4) aiding the family in meeting medical needs, such as arranging for substance abuse treatment for family members, immunizations for children, etc., and making follow-up support resources available; 5) teaching the family housekeeping, homemaking and other organizational skills needed to provide a positive environment (e.g., modeling behavior such as assisting the family to clean the home); 6) referring and linking the family with needed concrete services (i.e. aiding the family in obtaining furniture, beds, etc.); 7) referring and linking the family with follow-up services when necessary; 8) transporting or arranging for transporting the family; and 9) providing day care to families to attend parent education programs.
Provide coordination, planning, technical assistance and proposal drafting for Flathead County Partership Project. Number of families to be served to be determined through the planning process.
Provide a wide range of goal-directed services to families, including but not limited to: 1) teaching appropriate parenting skills; 2) family and individual communication skill-building; 3) teaching budgeting skills; 4) aiding the family in meeting medical needs, such as arranging for substance abuse treatment for family members, immunizations for children, etc., and making follow-up support resources available; 5) teaching the family housekeeping, homemaking and other organizational skills needed to provide a positive environment (e.g., modeling behavior such as assisting the family to clean the home); 6) referring and linking the family with needed concrete services (i.e. aiding the family in obtaining furniture, beds, etc.); 7) referring and linking the family with follow-up services when necessary; 8) transporting or arranging for transporting the family; 9) increasing coordination in community support options and in community services available to families; 10) providing parent education classes; and 11) providing day care for parenting classes and respite day care.
Provide a wide range of goal-directed services to families, including but not limited to: 1) teaching appropriate parenting skills; 2) family and individual communication skill-building; 3) teaching budgeting skills; 4) aiding the family in meeting medical needs, such as arranging for substance abuse treatment for family members, immunizations for children, etc., and making follow-up support resources available; 5) teaching the family housekeeping, homemaking and other organizational skills needed to provide a positive environment (e.g., modeling behavior such as assisting the family to clean the home); 6) referring and linking the family with needed concrete services (i.e. aiding the family in obtaining furniture, beds, etc.); 7) referring and linking the family with follow-up services when necessary; 8) transporting or arranging for transporting the family; 9) increasing coordination in community support options and in community services available to families; 10) providing parent education classes; and

Region #	REGION	SITE	COUNTY	CONTRACTOR	Service START	Contract END	# of Families Served	Target Population	BUDGET	STAFFING
5	Western Montana	Missoula	Missoula	Child & Family Resource Council	7/1/94	1/31/95		prenatal - 3 & referred to DFS	$12,176.00	.5 FTE Coordinator (for 7 months)
5	Western Montana	Missoula	Missoula	Missoula County	1/1/95	6/30/95	37	prenatal - 3 & referred to DFS	$72,489.00	Subcontracts with Missoula City-County Public Health, Futures, and Young Families .5 FTE Coordinator

SERVICE DESCRIPTION
11) providing day care for parenting classes and respite day care.
Provide coordination, planning, technical assistance and proposal drafting for Missoula Partnership Project.
Intensive home visiting to 30 families through Missoula Health Department; intensive case management to 7 teen mothers through Futures; support group for 12 young teen mothers through Young Families at Sentinel High School; and parent education (Nurturing Program), respite services, and library resource materials.

LISTING OF PARTICIPANTS INVOLVED IN DEVELOPMENT OF PARTNERSHIP PROJECTS BY COMMUNITY

REGION 1

Glasgow

Eleanor Pratt, Valley County Board of Commissioners
Vickie Bell, R.N., Valley County Health Dept.
Theresa M. Northup, Scottie Day Care
Barbara Hoffman, Valley County Extension Service
Jean Robotham, Department of Family Services
Linda C. Nybakken, Valley County Welfare Office
Ellen Crosby, Dept. of Social and Rehabilitative Services
Bridger Franger, State Probation/Parole Office
Clay Berger, Valley County Sheriff's Dept.
Betty Jagiello, Valley County Coalition
Dennis Idler, Principal - School District No. 1
Brenda Schye, DFS Family Services Advisory Council
Dr. John L. Brown, Chair-Valley County Health Board
Billie Brownlee, Department of Family Services
Arnold Bighorn, Ft. Peck Social Services Planner

Glendive

Rod Huisman, Department of Family Services
Jean Seifert, Dawson County Health Department
Karen Larson, Home on the Range
Marji Wielgosh, Developmental Educational Assistance Program
Linda O'Connor, Glendive Medical Center

Sidney

Kerry Pierce, BSW, Richland Community Memorial Hospital
Karen Ziegler, Richland Community Memorial Hospital
Joan Eldridge, WIC Home Economist
Barbara Lane, Richland County Coalition Against Domestic Violence
Blake Passmore, M.Ed., LCPC, Mental Health Services
Don Tiffany, Richland Co. Sheriff
Joyce Williams, M.D., OB/GYN
Carmen Johnson, M.D., Family Practice
Richard Phillips, District Judge
Kim Nash, Hi-Line Homes, Inc.
Rod Huisman, Department of Family Services
Rick Thompson, Hi-Line Homes, Inc.
Sherry Iverson, Sidney Public Schools
Vickie Metcalfe, Elementary Counselor, Sidney Public Schools

Miles City

Sylvia Danforth, Developmental Educational Assistance Program
Shirley Tiernan, DFS Regional Administrator
Terry Gable, Department of Family Services
Jessica Stickney, parent
Ernest Bighorn, Indian Development and Education Agency
Betty Emillson, Big Country Cooperative
Jan Erickson, Head Start
Dawn Ottoy, Head Start
Gail Mugglie, MSU Extension Services, Custer County
Larry Grant, Juvenile Probation Office

Miles City (continued)

Sonny Butz, Chief Juvenile Probation Officer
James Young, M.D., Pediatrician
Patricia Pezzarossi, M.D., Pediatrician
Deanne Witcher, Public Health and WIC
Noni Zook, Custer County Superintendent of Schools
Kathy Bouchet, Vocational Rehabilitation
Patty Lavin, Custer County Mental Health
First Bank representative
RSVP representative

REGION 2

Hill and Blaine Counties, Ft. Belknap and Rocky Boy Reservations

Bob McLaughlin, Human Resources Development Council
Yvonne Parker, Chippewa Cree Tribal Social Services
Earl Arkinson, Chippewa Cree Tribal Social Services
Mary Pyette, Blaine County Health Dept.
Kathy Mader, Hill County Health Dept.
Robin Morris, Havre Substance Abuse Prevention Coalition (HELP)
Florence Horn, Ft. Belknap Tribal Social Services
Janice E. Hawley, Ft. Belknap Community Council
Maria Quincy, Ft. Belknap Court System
Kelly Vies, Counselor, Chinook Schools
Kathy Bessette, Chair, Hill County Commissioners
Keith L. Benson, Blaine County Commissioner
Lorrie Cofer, Havre Job Service
Shirley Briese, Hill County Human Services
Katherine Williams, Educational Opportunity Center, Northern Montana College
Marsha Gummer, Tri-County Advocacy Council
Judy Rominger, Department of Family Services
Tim Whitney, Blaine County Human Services
Brenda Murdock, Blaine County Sheriffs Dept.
Judy Ward, Hill County Extension Service
Sandy Woldstad, Blaine County Extension Service

REGION 3

Billings

Marge Eliason, family advocate and parent
Lynne Gillig, Lutheran Social Services
Nancy O'Hara, Even Start Coordinator
Terry Egan, Yellowstone County Extension Services - EFNEP
Kathy Helser, Early Childhood Intervention
Carol Blank, The Family Tree
Doris Biersdorf, Yellowstone City-County Health Dept.
Judy Bryngelson, Head Start
Betty Petek, DFS Regional Administrator
Lee R. Hammond, Youth Dynamics, Inc.
Taffy Schupp, Deaconess Medical Center
Leonard Orth, East Yellowstone Cooperative
Barbara Sample, Family Support Network
Paula Murray, Yellowstone Special Services
Bill Snell, INCARE (Native American Urban Center)
Lavern Peterson, Big Brothers/Big Sisters
Jani McCall, Youth Dynamics Inc.
Peggy Jackson, Family Support Network

REGION 4

Granite County

Donna Lundquist, Head Start - Home Start Coordinator
Sharon Sherd, Department of Family Services
Ruth McDonald, Granite County Public Schools
Jan Bowen, Granite County Treasurer
Linda M. Shaw, Granite County Public Schools
Margie Braach, parent
Lori Mann, parent and business owner
Joe Braach, School Principal, Philipsburg
Cheryl Clawson-Owens, Day Care Provider
Barbara Tinney, parent
Debbie Seitz, Dept. of Social and Rehabilitation Services
Gail Young, Pharmacist
Tammy Olk, Nurse
Debbie Cuen, Business owner

Deer Lodge County

Linda Case, Job Service
Patty Gulberson, Office of Human Services
Terry Waldorf, Department of Family Services
Lorene Frigaard, Mental Health Services
Linda Best, Deer Lodge County Health Dept.
Kent Haaland, Managing Resources Montana
Michael O'Rourke, Anaconda Family Enrichment Council and Anaconda Ministerial Association
Donna Thompson, Anaconda Family Enrichment Council
Mary Mullen, family representative
Debbie Richie, family representative
Gail Mickey, Head Start
Barbara Andreozzi, MSU Extension Services
Gary Shelton, Community Patrolman, Anaconda Police Dept.

Powell County

Sharon Sherd, Department of Family Services
Kathy Winter, family representative
Colleen McGuire, community member
Jennie Lord, School District #1
Gerri Anne Cutler, Pregnancy Help Center
Chris Miller, County Attorney
Tony Pfaff, Powell County Hospital
Sandy Heaton, Deer Lodge Prison

Beaverhead and Madison Counties

Jackie Foster, Women's Resource Center
Sue Hanson, Beaverhead County Health Nurse and MIAMI Project
Suzanna Bennatt, Barrett Memorial Hospital
Jody Webster, JOBS Program
Terry Waldorf, Department of Family Services
Chris Doderill, Department of Family Services-Madison County
Yvonne Wall, Department of Family Services-Beaverhead County
Glenna King, Women's Advocacy in Safe Homes
Barbara Kokerric, New Options for Displaced Homemakers
Ruth Hoagland, Barrett Memorial Hospital
Tina Visscher, Managing Resources Montana

Butte

Diana Campanella, Coordinator-Partnership Project
Barbara Mahugh, 4 C's
Terri Lanahan, Safe Space
Tom Billteen, AWARE
Pat Grimm, Family Outreach
Janet Rubich, Butte/Silver Bow Health Dept.
Lorena Krause, 4 C's
Janet Snowberger, Career Futures
Mary Berg, Career Futures
Debbie Cuny, Human Resources Development Council
Karen Hinick, Butte/Silver Bow Health Dept.
Linda Mason, ALAS-School District #1
Annie Descharme, North American Indian Alliance
Sarah McKiernan, Managing Resources Montana
Mike Clements, Department of Family Services
Colleen Fine, Butte/Silver Bow Community Development
Tom McGloin, Butte/Silver Bow Chemical Dependency Services
Rose Olson-Jany, Public Housing
Michele Brennick, Butte Head Start
Phyllis Costello, Big Brothers/Big Sisters
Daryl Milsten, parent
Carol Lovelett, Riverdell Adult Program
Stephanie Carolan, LVA Literacy

Helena

Mary Beth Frideres, Lewis and Clark City/County Health Dept.
Joan Miles, Lewis and Clark City/County Health Dept.
Royal Johnson, Head Start
Mike McGrath, County Attorney
Dick Meeker, Juvenile Probation
Shirley DeVoe, Helena School District #1
Pat Clinton, Casey Family Program
JoAnn Hale, Helena Housing Authority
Dan Sullivan, Rocky Mountain Development Center
Bill Verwolf, Helena City Manager
Marcia Allen, Business representative
Alan Nicholson, Business representative
Colleen Lippke, Department of Family Services
Deborah Christiansen, Dept. of Social and Rehabilitative Services
Bonnie Huestis, Mental Health
Blake Wordal, County Commissioner
Amy Palmer, parent and community member
John Wilkinson, Intermountain Children's Home
Lori Fearon, Summit Project
Darren Melton, Summit Project

Bozeman

Stephanie Nelson, Gallatin City-County Health Dept.
Kathy Pattee, Superintendent, Monforton School
Susanna Irion, Counselor, Monforton School
Leslie Halko, parent
Joe Albro, Department of Family Services
Yvonne Hauwiller, Bozeman School District Community Education
Claudia Venditti, Gallatin County Prevention Coalition
Deborah Neuman, Prevent Child Abuse, Inc.
Rep. Beverly Barnhart, legislator
Vicki DeBoar, Bozeman School District
Dorothy Filson, Department of Family Services
Joan Davies, Dept. of Social and Rehabilitative Services

Bozeman (continued)

Joan Rudberg, United Way
Jodi Overstreet, parent
Jean Bucher, Children First

REGION 5

Libby-Troy

Ann Reed, Libby Community Interagencies
Alan Burley, Libby Public Schools
Cathy Spencer, Dept. of Family Services
Rachel Barley, Libby Public Schools
Susan Horelick, St. John's Lutheran Hosital
Andrea Johnson, Libby Public Schools
Cindy Schaumberg, parent
Sandy Elmore, Early Intervention Specialist
Connie Love, parent and parent educator
Penney Stras, parent
Carol Ramos, Women's Help Line
Andrea Johnson
Rachel Burley, Speech Therapist
Jane Jimeno, Literacy Volunteers
Dick Blecatsis, Mental Health Center
Bill Martin, Recovery Northwest
Karol Spas, Libby Public Health Dept.
Jeff Wedel, Department of Family Services
Leslie Canepa, Troy Public Schools
Ken Paulson, Troy Public Schools
Merle Swanson, Troy community member

Eureka

Julie Fleck, Counsellor
Angi Miller, Day Care provider
Cheryl Zarnowski, WIC
Pat Truman, Eureka community member
Karen Marvel, Recovery Northwest
Susan Christofferson, The Nurturing Center (Kalispell)

Missoula

Laurie Gadbow Hunt, Child and Family Resource Council
Barb Riley, Women's Opportunity Resource Development
Geoff Birnbaum, Missoula Youth Homes
Cindy Graham, FUTURES
Don Householder, Joseph Living Center
Anita Coryell, YWCA Domestic Violence Program
Karen Emerson, Department of Family Services
Warren Wright, DRS Regional Administrator
Cindy Klette, Missoula County
Bruce Buchman, Extended Family Services
Sue Forest, Rural Institute on Disabilities
Chris Volinkaty, Comprehensive Development Center
Rachel Villeaux, Missoula County Schools
Cindy Bartling, Friends to Youth
Janet Bush, Child Care Resources
Peg Shea, Turning Point
Ellen Leahy, Missoula City-County Health Dept.
Lynda Reed, parent
Laura Pickett, parent
Selena Theiessen, parent
Lora Mehrer, Missoula School District #1

Missoula (continued)

Scot Anderson, Head Start
Karen Rehard, Missoula Public Library
Patti Furness, Missoula Job Service
Kelly Petit, Missoula Food Bank
Kathy Young, Families First
Laura Nier, WMRC Mental Health
Carole Graham, Office of Human Services
Yvonne Bradford, Missoula City-County Health Dept.
Kay Hoag, Community Care
Sue Webster, Willard Adult Learning Center
Maureen O'Malley, Lutheran Social Services
Patty Duezabou, community member
Dan Fox, Department of Family Services

Flathead

Elaine Peterson, Western Mt. Regional Mental Health Center
Mary Thramer, Western Mt. Regional Mental Health Center
Pam Andersen, Department of Family Services
Jackie Sternmitz, Managing Resources Montana
Lorrie Larson, Flathead Council for Families
Boni Stout, Flathead City-County Health Department
Jody White, Flathead City-County Health Department
Theresa Luhman, The Nurturing Center
Karlyn Gibbs, Comprehensive Development Center
Sandra Lonon, Comprehensive Development Center

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SEPTEMBER 1995

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May 1995

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COMMUNITY SURVEY OF SERVICES
December, 1994

Surveys of services were conducted in December of each county's resources in Eastern Montana. The purpose in conducting these surveys is two-fold. First, each Family Service Advisory Council must make a recommendation on how to utilize the money allocated though the Family Strengthening Program. This requires a knowledge of what is available in each county in an effort to identify the gaps. Secondly, this survey identifies the scarcity of resources in Eastern Montana, which impact the services provided by each DFS office. Without a wealth of resources, the DFS line worker must compensate and provide more intensive services. This affects caseload size and time spent per client family. This then forms the basis of the argument against allocating staffing and funding solely by population.

County Population - Estimated 7/1/92

Carter	1,489	Prairie	1,297
Custer	11,763	Richland	10,510
Daniels	2,128	Roosevelt	10,864
Dawson	9,064	Rosebud	10,592
Fallon	3,016	Sheridan	4,490
Garfield	1,428	Treasure	884
McCone	2,099	Valley	8,195
Phillips	5,090	Wibaux	1,129
Powder R.	2,050		

Domestic Violence Services

Domestic Violence Programs for victims are available in Sheridan, Richland, Rosebud and Dawson counties. Roosevelt county just began a new volunteer advocacy program for victims. Some of these programs are funded in part by the Department of Family Services and do provide these services to neighboring communities. Services include victim counseling and support, and short term shelter in local motels of safe houses. Advocates will assist victims in long term help as available. Services for batterers (group counseling) is available in Dawson, Custer and Rosebud counties and soon in Richland county.

Drug and Alcohol Services

Outpatient counseling is available in each of the seventeen counties in Eastern Montana except Roosevelt county. The frequency of services varies tremendously as outlined in the following chart (.1 FTE relates to one day of services every 2 weeks, .2 FTE equals weekly services, .5 FTE is half time, etc.)

COUNTY	*# OF FTE*	*COUNTY*	*# OF FTE*
Carter	.2	Powder R.	.2
Custer	1.6	Richland	.8
Daniels	.2	Roosevelt	.0
Dawson	1.9	Rosebud	1.0
Fallon	.8	Sheridan	.8
Garfield	.2	Treasure	as needed
McCone	.2	Valley	1.0
Prairie	.05	Wibaux	.05
Phillips	.8		

TOTAL FTE / REGION - 9.8

Outpatient services are available through Spotted Bull in Poplar for Native Americans. There are 6 FTE's providing this service. On the Northern Cheyenne Reservation, Detox and out patient counseling is available from 2 FTE positions.

All inpatient facilities are out of the region.

Intensive outpatient services used to be available in Richland County, but no longer are.

Mental Health Services

Mental health services are available in all Eastern Montana counties as outlined in the following chart. FTE's represent the number of counselor days in each county as per above.

COUNTY	*# OF FTE*	*COUNTY*	*# OF FTE*
Carter	.1	Powder R.	.2
Custer	3.2	Richland	2.0
Daniels	.1	Roosevelt	1.0
Dawson	1.7	Rosebud	1.8
Fallon	.1	Sheridan	.5
Garfield	.1	Treasure	.2
McCone	.2	Valley	1.8
Prairie	.2	Wibaux	.2
Phillips	.2		

TOTAL FTE /REGION 13.6

Indian Health Services on the Fort Peck Reservation employs three FTE's providing psychological services. IHS on the Northern Cheyenne Reservation employs 2 FTE to provide these services.

There are three intensive case managers for children through the MRM program, in Glendive, Miles City, and Glasgow. There is one Managing Resources specialist for MRM for the region, based in Miles City.

Three Mental Health offices also have day treatment for adults; these are in Glendive, Miles City, and Sidney.

There are two adolescent day treatment programs in the schools; one in Glendive and one in Miles City (total combined capacity of 20 youth).

No inpatient services are available in this region. Group Therapy is limited to the major centers on an as needed basis. No counseling is available for sex offenders.

Private Therapists

Private Therapists (not employed by the mental health center) are available in the following areas:

Glendive	1.2	FTE
Scobey	1.0	FTE
Sidney	.5	FTE
Miles City	2.0	FTE

TOTAL FTE'S / REGION 4.7

Family Based Services

There are two FBS programs in operation in Eastern Montana, one in Sidney/Glendive and one in Miles City/Forsyth/Colstrip. The Sidney/Glendive program will also take referrals from Circle and Plentywood. Each program employs two FTE's serving approximately 24 families per program.

Family Support Programs - DD Children

DEAP and HiLine Home Program cover all areas in the region, providing services to families with children who are developmentally delayed or at risk of developmental delays.

Parenting Classes

Parenting classes are available regularly in Custer, Rosebud, Roosevelt, and Richland Counties. Classes are available occasionally in Sheridan, Phillips and Dawson counties (regularly = three times/year or more; occasionally = less than three times/year). The classes taught on the Fort Peck and Northern Cheyenne Reservations are entitled 'Positive Indian Parenting' ('Cherish your Indian Children').

Other areas do not have parenting classes, or have them so infrequently they are not considered a resource. Most areas having the parenting classes are heavily supported by DFS.

Home Visitor Programs

The Partnership project is beginning the home visitor programs in Glendive, Glasgow, Sidney and Miles City. These are small programs for new families (to be eligible, all children must be three of under at the time of acceptance into the program).

Headstart has small home visitor programs connected with each center (Miles City, Glasgow, Wolf Point, Lame Deer and Glendive).

The Health Department in the larger counties attempt to visit each newborn and family at least once (Custer, Rosebud, Dawson, Richland, Valley, Roosevelt, and Phillips Counties). Public Health Services on the Fort Peck Reservation and the Northern Cheyenne Reservation also provide these services.

Richland County is a Follow Me pilot site, a program utilizing health nurses as home visitors.

Glasgow School District has attempted regular home visits with younger children and their families who are at risk of problems.

HeadStart Programs

HeadStart programs are located in Miles City, Lame Deer, Glendive, Wolf Point, and Glasgow. Unsuccessful attempts have been made to secure funding for a program in Sidney.

Group Homes

Glendive has a Therapeutic Group Home (Big Sky) for girls, capacity of eight. Glendive also has a regular group home for boys (Gateway), capacity of seven.

Wolf Point has a group home for girls (Riverview), capacity of eight.
Whitewater (Phillips Co.) has a group home for boys (Northern Montana Youth Ranch), capacity of 14.

Pediatricians

Miles City has 2.5 FTE pediatricians available through the clinic, Wolf Point has one FTE. Pediatrician services are usually available to tribal members through Indian Health Services on the Northern Cheyenne Reservation. No other area has pediatricians available (Glendive just lost Dr. Reynolds - she moved her practice to Miles City).

Psychiatrists

There are no direct Psychiatric services available in any county. Persons requiring this service need to travel to Billings, Great Falls, Williston, or Dickinson. Some Mental Health centers and some Hospitals have access to 'TeleMed' for interactive video services with Deaconess and Shodair (current locations include Miles City, Glendive and Culbertson).

Public Transportation

No public transportation is generally available to the public in any area in Eastern Montana.

Big Brother/Big Sister

Miles City has the only Big Brother/Big Sister program in the area.

Respite Care

Respite care (temporary care for children while a family needs a break) is available on a very limited basis to those families involved in the home visitor programs through the Partnership project. Respite is also available for families involved with DEAP and HiLine Homes. Respite is available on a limited basis to foster care families.

JOBS Programs

Job Opportunities and Basic Skills Programs (JOBS), support and training to assist families in reducing dependence on public assistance, are available in Custer, Rosebud, Dawson, Phillips, Richland, Roosevelt, and Valley Counties. Powder River will be developing a program in 1995.

Foster Homes

District	Regular Foster Homes	Provisional Foster Homes
Glasgow	16	0
Sidney	20	3
Miles City	26	2
TOTAL	62	5

Some foster homes are restricted to specific children, possibly relatives. Other foster homes are limited to a specific age range, sex, or special needs category.

There are 72 children placed in regular foster care in this region.

Day Care Facilities

District	Day Care Homes	Centers	Unregistered
Glasgow	62	3	18
Sidney	43	5	19
Miles City	47	5	23
TOTAL	152	13	60

Unregistered providers represent those who have gone through the process of being recognized by the State as providing care for a specific child for state payment. No statistics are available on how many providers are operating in violation of state law requiring registration.

NORTH CENTRAL REGIONAL FIVE YEAR PLAN
Excerpts

INTRODUCTION

The Family Support and Preservation Act requires that each state prepare and present a Five Year Integrated Plan for the support and preservation of families. This requirement results from the move away from traditional child welfare services that relie heavily upon out-of-home placements, toward greater emphasis on the use of family and community based service models aimed at keeping families together. While the goal of family preservation is clearly the emphasis, the act recognizes the need to develop the continuum of services at every level, so that communities will be prepared to meet the needs of all families from the prevention level, through in-patient treatment. Montana Department of Family Services has chosen to meet the requirement by initiating a stragegic planning effort at the local and regional levels. Each region is required to construct a five year plan for that area. The composite of these five plans are the State Five Year Plan for Family Support and Preservation. This plan is the Region II response to the strategic planning process.

This five year plan jointly initiated by the Managing Resources for Montana Team, The North Central Regional Advisory Council and Department of Family Services incorporates the advances already made in streamlining existing services, developing new family support services and other imporvements made in the continuum of services in the past two years. As it moves through the planning cycle the emphasis shifts progressively toward creating more prevention services, and constantly evaluating existing and new services in terms of their success at reducing out-of-home care, and increasing family unity.

Including as many community people from as many communities in the region as possible has insured that this plan genuinely reflects the needs of Region II. Every effort has been made to insure that small communities were not left out of the plan. To the greates extent possible, program development and funds are distributed equally to try to address as many problems as possible. In these times of dimishing resources, inclusion and cooperation are increasingly necessary in order to support and preserve families in Montana communities.

PLANNING METHODOLOGY

The Regional Managing Resources Team along with the North Central Regional Advisory Council and DFS was utilized as the planning body for the Five Year Plan. They were chosen because of extensive experience in regional planning, and because much of the ground work they had laid was relevant to it.

The planning cycle generally runs in three phases; the first year planning, second year implementation and third year assessment and evaluation. Any adjustments that are seen necessary after the third year, will be made in year four. The final year of the plan includes overall program evaluation, and reconducting the needs assessment process.

The Regional Managing Resources Team held eleven meetings with DFS, MHC staff, school, parents and other county and court personnel throughout the Region during the months of February and March. In addition, public forums were held in Great Falls, Cut Bank, and Havre.

Notices were distributed to County Commissioners, Youth Probation Officers, Regional Managing Resources Team members, DFS Supervisors, DFS social workers, private providers, foster parents, and school personnel (See attached lists for those attending).

The Managing Resources Specialist met with the DFS Regional Youth Advisory Council on January 13,1994 and the Youth Detention Board on February 3, 1994 to obtain input on the plan.

On February 24-25, 1994, members from the Regional Managing Resources Team met in Conrad, Shelby, Cut Bank, and Browning with Child Protective Teams from those counties. On March 1, 1994 members from the Regional Team met with Child Protective Team and Sex Abuse Task Force members in Ft. Benton and Great Falls. On March 2, 1994 a public forum was held in Great Falls at the pubic library. On March 4, 1994 a meeting was held in Choteau, Montana. On March 8 a meeting was held in Chinook and Havre with the Child Protection Teams and a public forum was held at Northern Montana College. On March 9, meetings were held with the Child Protective Teams at the Fort Belknap reservation and the Rocky Boy reservation. On March 15th a meeting of parents was organized by the local PLUK representative and input on services needed was gathered. Notices were distributed to parents currently using MRM and Case Management Services.

In addition, letters offering any additional input into the plan were encouraged. They are attached in Appendix F.

SUMMARY OF THE PLAN

The primary goal of this plan is to develop a coordinated continuum of community based services for children and families so that they can regain their level of indipendant functioning within their respective community settings.

the delivery system for meeting the needs of SED children and their families was fragmented. Children's services were provided by many different agencies with varying service delivery patterns and funding mechanisms without effective coordination. Although key agencies and children's advocates in the community had been meeting for years as the Cascade County Children's Services Committee, no one group could claim a clear plan for children's services in Great Falls or the region. Managing Resources Montana has changed this situation and is bringing about the consolidation of those agencies and groups delivering services to youth. Planning will be more streamlined and effective as we learn to work more collaboratively.

The Department of Family Services, The North Central Regional Advisory Council and the Managing Resources for Montana Team have initiated a joint planning process involving providers to enhance the current network of crisis stabilization services. The Regional Managing Resources team will support this process and work to ensure that it takes place across the region.

The current capacity for residential treatment in Montana is sufficient to serve children in need of that service. The Montana Deaconess Medical Center is unlikely to develop this service even though they currently have a certificate of need for ten beds. While development of these residential services could have improved accessibility and coordination of services for children in this region, the demand for this type of care has decreased as coordinated community based services have increased.

The Regional Managing Resources Team has established service priorities which are discussed in greater detail on pages 47-51, but which can be summarized as follows:

During FY 94, MRM initial development included improving cooperation among all groups serving children suffering from serious emotional disturbances, developing a data base, developing Children's Case Management services, and beginning the development of a continuum of services for children.

During FY 1995, additional Children's Case Managers will be hired resulting in a maximum of fourteen. Family support and parent education services will continue to be emphasized and contracts for the provision of these services will ensure they are delivered. Increased parent involvement will be encouraged through the development of a parent advisory group and through mental health professionals in family centered

techniques. Communication with parents, consumers, and agency personnel concerning Family Support services and activities will be improved through a newsletter and structured meetings.

Contracts for Family Based Services, reunification services, therapeutic foster care, moderate level therapeutic group care and intensive level therapeutic group care will help provide a greater continuum of services for SED children. The current plan to change Medicaid rules to fund Therapeutic Foster Care and Family Based Services will free up general fund monies allowing for expansion of these services throughout the region.

The Mental Health Center will explore the need for increased outpatient individual and group therapy services regionwide. At issue here may be increasing access to services rather than increasing the number of providers. As alternative and in-home services develop the RMRM Team will track the demand for clinic-based outpatient services. Increased coordination of services with reservation tribal social services, BIA social services and IHS mental health staff will assist in the provision of services to Native Americans in the region.

During FY 1995 and 1996 expanded evaluation and treatment options for sexually reactive children and youth sexual offenders is a priority.

For both FY 1996 and 1997, two major concerns will be achieving funding stability and increased flexibility and developing valid outcome studies to measure efficacy of services.

The primary goal of the Regional Managing Resources Team is to develop appropriate family-centered and community based services which meet the needs of families in the region. A continuum must be built upon the existing fragmented service system network. The intent of this plan is to accomplish this without serious disruption of the existing network and to retain its most positive aspects. It is our strong belief that this goal will be achieved only through responsible stewardship of the available resources.

Family Support Services

We have defined these services as therapeutic aides, mentors, respite care, Big Brothers/Sisters, paid companions, specific behavioral intervention training, therapeutic recreations, cultural programs, or the provision of transportation costs in order to go to therapy or other services.

Existing Great Falls Family Support Service Network

Family support services, such as transportation to therapy, therapeutic aides, and respite care, have been available prior to MRM to only a few seriously emotionally disturbed children in Great Falls under "wraparound" contracts with DFS. These "wraparounds" were specially developed by the Golden Triangle Mental Health Center for three children with very severe mental illnesses. Services funded under these contracts were outpatient individual therapy, medication management, therapeutic aides, respite care, special school programs and therapeutic foster care. All three "wraparounds" were successful in providing treatment to the children enabling them to stay in the Region for up to 18 months, between 1989 and 1993.

Under the MRM program, therapeutic aide services are being provided to parents identified by the treatment teams as in need of this service. The first therapeutic aide was hired in December and the program is continually growing (See Table 1.3) .

During the summer months a specialized recreational program has been provided, in Great Falls, to therapeutic foster children. Whether this program will be expanded to include other SED children has not been discussed at this time, but SED children between the ages of 10-14 are in particular need..

Native American cultural and healing activities were instituted for therapeutic foster children during the spring of 1993. It was originally felt that Indian children who were removed from the reservation and their home community would benefit from traditional Native healing methods such as the Talking Circle or the Sweat Lodge. Not only have these activities helped to improve and solidify the Indian children's self-images, some of the white children have benefited greatly from the non-verbal methods. At present the activities are arranged on a "catch as catch can" (once or twice monthly) basis by Craig Falcon, a Children's Case Manager.

Existing Rural Family Support Service Network

Currently, the MRM program is providing six therapeutic aides and three mentors plus transportation assistance to two families and respite to three families in rural counties.

Great Falls Family Support Service Gaps

Individualized family support services, which are tailored to the needs of specific children based upon the recommendations of the child's treatment team, continue to be needed in Great Falls. Development of the various new services takes recruitment and training time, but as a "pool" of qualified personnel is created throughout the region more children will benefit from these services.

Cultural activities should be provided to the Native American child in MRM and need to occur on a more definite, twice monthly schedule, with one activity focused on culture and the second to be of a healing nature.

Areas in which gaps in service exist include the following: therapeutic aides, Big brothers and sister, mentors and adult friends, cultural programs, transportation services, recreational programs and paid companions.

The estimated number of Great Falls families referred to MRM and needing family support services is 36.

Rural Family Support Service Gaps

Individualized family support services, which are tailored to the needs of specific children based upon the recommendations of the child's treatment team, continue to be needed in the rural counties. Development of the various new services takes recruitment and training time, but as a "pool" of qualified personnel is created throughout the region more children will benefit from these services.

Cultural activities should be provided to the Native American child in MRM and need to occur on a twice monthly schedule, with one activity focused on culture and the second to be of a healing nature.

Areas in which gaps in rural services exist include the following: therapeutic aides, Big Brothers and Sisters, mentors and adult friends, cultural programs, transportation services, recreational programs and paid companions.

The estimated number of rural families referred to MRM and needing family support services is 56.

Goals and Objectives

The following measurable goals and objectives for each year of the three year plan have been developed by the Regional Managing Resources Team.

	Goals/Objectives	Time Lines	Responsible Person
	FY 94 (July 1993-June 1994)		
1.0	**Improve interagency cooperation and educate agency personnel and providers about Family Support and Preservation throughout Region II.**		
1.1	Meet with school district personnel (See APPENDIX B)	Quarterly	RMRT/MRS
1.2	Meet with DFS supervisors	Quarterly	RMRT/MRS
1.3	Meet with Youth Court personnel	Quarterly	RMRT/MRS
1.4	Meet with Reservation tribal social services, BIA social services and IHS mental health staff.	Quarterly	RMRT/MRS
1.5	Meet with DFS social service personnel and private providers including private therapists.	Biannual	RMRT/MRS
1.6	Publish a quarterly news sheet which contains minutes of each meeting and other pertinent information.	Quarterly	MRS
1.7	Budget money to send agency personnel and parents to "Wraparound" conference in Vermont in September 1994.	Annually	RMRT
1.8	Develop training for mental health professionals on working with parents of SED children.		
1.9	Bring pediatricians into MRM network by meeting with and discussing referral to the program.	Annually	Consumer Group
2.0	**Collect and maintain information required for managing resources.**		
2.1	Develop a computer data base of MRM youth tailored to the information needs of the SMRMT and the regional program.	Completed by 5/1/94	MRS
2.2	Analyze data on a monthly basis for utilization by county for the RMRT.	5/1/94	MRS
3.0	**Develop case management services for SED youth**		

3.1	Utilize brokering model as interpreted by Medicaid rules.	7/1/93	GTCMHC
3.2	Conduct an annual assessment to determine the efficacy of the brokering model and compare it to other models of case management.	6/30/94	MRS
3.3	Train case managers in communication skills, etc.	6/30/94	MRS
4.0	**Develop parent support services**		
4.1	Assist interested parents in organizing peer counseling groups.	Ongoing	MRS
4.2	Provide other support services as requested ((e.g., meeting rooms, educational materials, etc.)	Ongoing	MRS
4.3	Develop therapeutic skills training for parents of SED children.	June 1994	MRS
5.0	**Develop family-based services across the region.**		
5.1	Develop family-based services in Cut Bank	4/94	DFS/MHC
5.2	Develop family-based services in Conrad	4/94	DFS/MHC
5.3	Develop family-based services in Chinook	4/94	DFS
6.0	**Develop therapeutic foster care services in rural counties.**		
6.1	Recruit therapeutic foster care homes in Chinook	12/93	MHC
6.2	Recruit therapeutic foster care homes in Havre	11/93	MHC
6.3	Recruit therapeutic foster care homes in Conrad	5/94	MHC
6.4	Recruit therapeutic foster care homes in Cut Bank	5/94	MHC
6.5	Recruit therapeutic foster care homes in Choteau	5/94	MHC
6.6	Continue to generate interest in therapeutic foster homes on all three Indian Reservations in the Region.	6/94	MHC
7.0	**Provide for 90-day review of service plans for all SED youth receiving services from the program.**		
7.1	Develop data base capacity for indicating when service plan reviews are needed.	6/94	MRS
8.0	**Decrease the demand for residential treatment service.**		
8.1	Reduce medicaid psychiatric residential treatment utilization by 20% based on the number of children in residential treatment at the beginning and end of the fiscal year.	Ongoing	MRS/RMRT
8.2	Request from First Mental Health a quarterly report of the number of children receiving Medicaid residential.	Ongoing	MRS/RMRT

8.3	Develop a system for determining the number of children receiving residential treatment funded through any public money.	Ongoing	DFS/MRS
8.4	Develop targets for reduction in the utilization of non-medicaid residential treatment.	Ongoing	DFS/RMRT
9.0	**Develop a method to distinguish the difference between the treatment needs of youth and the housing needs of youth.**		
9.1	Form a committee to develop criteria which define and address each need.	FY 94	RMRT
10.0	**Conduct surveys for quality assurance, planning and implementation information.**		
10.1	Develop and administer standardized patient satisfaction surveys.	FY 94	RMRT
10.2	Develop and administer standardized parent satisfaction surveys.	FY 94	MRS
10.3	Develop and administer standardized provider satisfaction surveys.	FY 94	MRS
10.4	Evaluate outcomes and report to Regional and State MRM Teams.	FY 94	MRS
11.0	**Provide timely responses to requests for services.**		
11.1	Form a Response Review Team from MHC staff and other providers to evaluate response times and suggest changes.	FY 94	MRS
12.0	**Obtain fiscal training for MRS/RMRT/DFS/MHC staff.**		
12.1	Discuss training in budgets, etc with DFS RA and MHC Executive Director.	6/94	MRS
12.2	Train Regional Team in DFS/MHC budgets.	6/94	MHC/DFS
13.0	**Plan for Juvenile Corrections aftercare services in Region II .**		
13.1	Meet with Juvenile Parole personnel and discuss planning process.	June 94	MRS
14.0	**Encourage the development of a parent advisory group to MRM.**		
14.1	Notify MRM participating parents and parents of peer counseling group of RMRMT meetings and invite them to attend and form parent advisory group.	March 94	MRS
14.2	Provide clerical support for parent advisory group newsletter..	June 94	MRS
14.3	Assign liaison to parent advisory group.	June 94	MRS
14.4	Provide meeting rooms for parent advisory group.	June 94	MRS

15.0	**Provide utilization review services for all children receiving services under Medicaid.**		
15.1	Notify DCHS of Region II's interest in providing UR services.	March 94	MRS
15.2	Receive training in UR services	4/94	CMHC/MRS
15.3	Contract with SRS to provide UR services	FY 95	MHC
	FY 1995 (July, 1994-June, 1995)		
16.0	**Continue to improve agency/provider relationships across the region.**		
16.1	Develop a MRM Regional Resource Guide describing children's services throughout the Region.	12/94	MRS
17.0	**Recognize and respond appropriately to diverse community cultures and needs across the Region.**		
17.1	Interview community opinion leaders about the characteristics and needs of their communities.	11/94	MRS
17.2	Evaluate interview results and adapt programs to unique community needs.	12/94	MRS
17.3	Develop MRM grievance procedure.	FY 95	MRS/RMRT
18.0	**Develop and evaluate outcome measures for services.**		
18.1	Work with State Team in the development of outcome measures.	7/94	MRS
19.0	**Exercise budgetary control at the local level of all relevant services.**		
19.1	Review and revise budget as needed.	7/94 - 12/94	MHC/RMRT/ MRS/DFS
20.0	**Develop a model crisis stabilization plan for communities throughout the region.**		
20.1	Monitor DFS crisis service development planning process.	Ongoing	MRS
20.2	Develop a uniform assessment of risk tool that must be completed during the initial phase of the service planning process.	8/94	MRS
20.3	Develop an RFP for the provision of training to shelter care staff in the appropriate management of children suffering from severe emotional disturbances.	8/94	MRS
20.4	Require that the staff of all shelter care facilities in the region receive training in the appropriate management of children suffering from severe emotional disturbances.	8/94	RMRT/DFS

20.5	Ensure that a crisis stabilization plan for rural communities be developed.	8/94	RMRT/DFS
20.6	Monitor the development of service plans that address family reunification for all children placed in crisis stabilization services.	Ongoing	MRS
21.0	**Determine how MRM interfaces with Medicaid Capitation of adult services .**		
21.1	Report to RMRT the progress of Medicaid capitation meetings.	FY 95	MHC

FY 96 (July 1995-June 1996)

The first three years of the plan have been devoted in great part to improving the continuum of services to children, and making the transition to a greater imphasis on family support and preservation. In the final two years family support services will be improved and expanded through out the region. More prevention services will be created and put into place.

22.0	**Continue to assess, review and revise FY 94 & 95 goals objectives and financial resources as necessary .** Develop and conduct out-come studies of Family Support and Preservation services.		
22.1	Review goals and objective .	Ongoing	MRS
23.0	**Explore and develop alternative funding sources .**		
23.1	Continue to discuss alternative funding sources with RMRT members and State team members.	Ongoing	MRS/MHC
23.2	Continue to work with IHS to improve services and cooperation on the three reservations.	on-going	
23.3	Work with school districts to fund school programs that will support families in need, and reduce the risk of failure to children from families in crisis.	on-going	
23.4	Work closely with the Montana Post Adoption Center to insure that the Families for Kids Program is successful at finding permenent families for the target population.		
23.5	Recruit people to provide a broader range of family based services.		
23.4	Using information and experiences gained from the Partnership project, develop and inpliment prevention services in each county in the region.	19/96	Regional teams

FY 97 (July 1996-June 1997)

The final yearis devoted to assessment and evaluation, and conducting a needs survey for the next planning cycle.

24.0	**Continue to assess, review and revise FY 94,95,96 & 97 goals , objectives and financial resources as necessary.**		
24.1	Continue to discuss goals at RMRT meetings.	Ongoing	MRS
25.0	**Explore and develop alternative funding sources.**		
25.1	Continue to discuss funding with RMRT and State Team members.	Ongoing	MRS/MHC/ DFS
25.2	Evaluate the Region II Family Based Services program using the out-come indicators developed by the Partnership Project. Based on this data, continue to expand FBS in the Region.	2/97	
25.3	Assess the advances in fostering cooperation and improving services on Indian Reservations in Region II.	On-going	
23.4	Through on-going efforts, the goal of 50% consumer participation on all boards will be realized.	6,97	
23.5	Out-come studies conducted last year will be imployed to assess the effectiveness of the Family Support Services system in the region.		
23.6	A region-wide needs assessment will be conducted to determine the services system needs for the next five year planning cycle.		

PARTNERSHIP TO STRENGTHEN BLACKFEET FAMILES

SUBMITTED TO DEPARTMENT OF FAMILY SERVICES

FEBRUARY 10, 1994

SUBMITTED BY:
BLACKFEET CHILD PROTECTION TEAM
UNDER THE DIRECTION OF THE
BLACKFEET TRIBAL BUSINESS COUNCIL
* P.O. BOX 870
* BROWNING, MONTANA 59417

(w) 338-7712
338-5605
LISA FALCON
SUSAN DAYRIDER - same #
B.F. - 5605
MESS # 472-3397

OBJECTIVES

1. To preserve the integrity of the family and to prevent unnecessary out-of-home placement, by providing in-home care to 15 families.

2. To link the child and family with appropriate community agencies and individuals to create an on-going community support system by setting up a treatment plan for 15 families.

3. To strengthen the family's coping skills and capacity to function effectively in the community by providing:

    * Parenting (if necessary)
    * Independent Living
    * Anger Management
    * Therapy

    And other services needed as stated in Assessment.

GOALS

1. To develop a comprehensive continuum of services in partnership with community organization that will increase the capacities of at-risk families to nurture their children in healthy environments by providing parents with the knowledge, skills, and support they need to do so;

2. To decrease the incidence of child abuse and neglect in the targeted population;

3. To improve the availability of service agencies to deliver coordinated, family focused services that are preventive, non-punitive, voluntary, and culturally responsive.

THESE GOALS ARE BASED ON THE RECENT FINDINGS OF THE NATIONAL COMMISSION ON CHILDREN, WHICH STATED THAT "MARGINAL CHANGE WILL NOT TURN THIS SYSTEM AROUND. INSTEAD, WE NEED FUNDAMENTAL REFORM TO ENSURE THAT FAMILY SUPPORT AND BASIC PREVENTIVE SERVICES ARE AVAILABLE EARLY TO REDUCE THE LIKELIHOOD OF FAMILY CRISES AND LESSEN THE NEED FOR CHILDREN TO BE REMOVED FROM THEIR HOMES."

THE NATURE OF HOMEBASE SERVICES

- Relating to families in a warm, direct, open and judgmental environment, and accepting the gesture of hospitalities.

- Demonstrating interest, concern, and respect for families.

- Identify the families strengths in addition to it's problems.

- Allowing the family to define its own problems and directing the intervention toward the goals decided upon by the family.

- Providing practical and tangible help to address a specific and urgent need as a first step.

- Remaining consistently available and accessible to the family on a regular basis and for crisis.

- Providing high levels of support and encouragement.

- Conveying positive expectations and hope.

***Including extended family**

CRITERIA FOR SERVICES

1. Family must reside within the geographic area.

2. The child must be at risk of out-of-home placement.

3. Families at risk of child abuse or neglect.

4. Families with emotionally disturbed children.

5. At least one parent must be willing to work with the Program to keep the family together.

6. There is no threat of violence or physical danger to staff.

7. Less intensive services are not adequate to meet families needs.

8. families of adolescents in conflict with family and community, i.e., acting out adolescents and status offenders.

MODEL

Series on Community Based Services for Children and Adolescents who are Severely Emotionally Disturbed.

by

Beth A. Stroul, M.Ed.
from Georgetown University

Evaluation

Use Family Based Services Evaluation already developed.

HOMEBASED SERVICES
BUDGET

1. **Personnel:**

   a. Full Time
   Director/Coordinator
   Ms. Lisa Falcon @ 20,000.00 per yr. $ 20,000.00

   b. Part Time
   Homebased Services Specialist
   560.00 p.p. x 8 p.p. 5,200.00

   c. Part Time
   Secretary @ 5.00/hr. @ 40 hrs. p.p.
   or 400.00/mo. x 8 mos. (no fringe) 3,000.00

   TOTAL $ 28,200.00

2. **Fringe**:

   @ 16% of Salary of 25,200.00
   Includes: Federal taxes, F.I.C.A., State,
   Workman's Comp. 4,000.00

3. **Operating Expenses**:

   a. Office Supplies, 20.00 x 12 mos. 240.00

   b. Postage & Xerox 20.00 x 12 mos. 240.00

   TOTAL $ 480.00

4. **Vehicle**:

   Rental @ $300.00 x 10 mos.
   For Home Visits & Travel. 3,000.00

5.	**Educational Material:** (estimated for training materials)	500.00
6.	**Local Travel:**	
	Gas for vehicle	1,550.00
7.	**Off-Reservation Travel**:	
	Attend training	950.00
8.	**Equipment:**	
	Computer/Monitor & desk.	1,100.00
	TOTAL	$ 39,780.00
	INDIRECT COST	4,420.00
	GRAND TOTAL	**$ 44,200.00**

HOMEBASE SERVICES DIRECTOR

Qualifications:

- B.A. Degree in Social Services or related field; or four years experience in the Mental Health Field.
- Ability to write grants and implement proposals.
- Ability to develop and implement policies and procedures.
- Personnel, fiscal, and data management experience.
- Two years supervision and/or management experience.
- Ability to work cooperatively and appropriately with other Agencies.
- Valid Montana drivers license.
- No convictions of child abuse/neglect, a background check will be conducted.
- Ability to relate well with Native American families.
- Must have knowledge of resources for special needs children and families.

Job Description:

- Under the direct supervision of the Blackfeet Tribal Business Council HESS Committee.
- Coordinate hiring of personnel with Tribal Personnel Director and assist with orientation and training of new staff.
- Develop staff work schedule.
- Arrange training for Staff and Program Development.
- Develop and maintain accurate records of clients and families for statistical, billing and for other reporting data.
- Develop and maintain method of billing placement and provide evidence of financial accountability.
- Develop and implement Program and Personnel Policies & Procedures.
- Provide positive support for clients, families and staff.
- Perform duties of a Homebased Specialist.
- Other duties as assigned.

HOMEBASE SERVICES SPECIALIST

Qualifications:

- B.A. degree in Social Services or related field; or, four years experience in the Mental Health field.
- Valid Montana driver's license.
- No convictions of child abuse/neglect, a background check will be conducted.
- Ability to relate well with Native American families.
- Must have knowledge in Behavior Management, Anger Management, basic counseling skills, parenting.
- Must be a rolemodel during working hours as well as in the community.
- Must have ability to implement treatment goals/objectives, recommendations and assessments.
- Must be motivated to work independently.
- Must have knowledge of resources for special needs children and families.
- Must be willing to travel.

Job Description:

- Assist in crisis interventions.
- Provide positive support for client and/or family.
- Be a positive rolemodel.
- Implement positive behavior techniques (set and enforce consistent behavioral limits to establish appropriate behaviors, skills, and attitudes).
- Ensure safety of client and/or family.
- Assist in developing appropriate problem solving skills.
- Implement Anger Management, Behavior Management, Self-Awareness, Stress management, Parenting skills, Independent Living Skills and Skill Building (example: Establish interest in activities, sports, crafts, etc.).

- Coordinating aftercare services for client and/or families.
- Observe and document family interactions.
- Implement outside services needed such as a therapist.
- Provide transportation for doctors appts, activities as needed.
- Intake assessments, write a recommendation summary and a discharge summary.
- Write a master treatment plan and treatment goals.
- Assist client and/or family with living skills as needed.
- Use positive "I" statements.
- Provide individual and family counseling.
- Provide a safe, secure restraining techniques for the acting out person using the Mandate System.

HOMEBASE SERVICES SECRETARY

Qualifications:

- A.A. Degree or 2 years minimum experience as a secretary.
- Must be able to type at a minimum of 60 words per minute.
- Must be willing to answer phones and communicate appropriately with the general public.
- Must be motivated to work independently.
- Must have some knowledge of resources for special needs children and families.
- Must be a role model during working hours as well as in the community.
- Must be computer literate.
- Must be able to perform Administrative Assistant duties.
- Must be willing to attend training and workshops.

Job Description:

- Answer phone
- Type from dictation
- Set up appointments for clients and families
- File pertinent documents
- Incoming, outgoing mail
- Xeroxing
- Complete administrative assistant duties as given by director
- Give clients, families and general public resource information
- Be a positive role model
- Keep all client and family information confidential

HOME BASED SERVICES PROJECT

BLACKFEET TRIBE

PROGRAM IMPLEMENTATION

The main focus of the Blackfeet Home Based Services Project will be coordination & concentration of resources on the Blackfeet Reservation. This includes interagency collaboration, integration of resources, and community development of services as identified by families and children. Over the past years, no "staffing" has been done on each family to include "all" agencies involved with realistic goals set.

There are two major values under the Blackfeet Home Based Project:

(1) Child Centered Approach - this includes identifying services available. Individual goals will be developed on each/or child with their input, that promotes personal dignity of each child. Family Focused Services - the integrity of each family will be supported by working with the family through basic information, services, support, respite, and other identified services whenever possible.

(2) Community Based Services - is the second value of the Project. This includes development of community based project/programs that help keep the child/family together in their family home.

There are over 14,000 enrolled Blackfeet Tribal members with approximately 11,000 living on the Reservation. Past identified needs identified the following:

* 65 to 95% unemployed.
* High educational drop-out rate (at least 50%).
* Families lack adequate transportation and at leat 60% do not have phones with 90% that live in rural areas that do not have phones.
* Very high rate of Teenage Pregnancy.
* High rate of Child Neglect.

It is impossible to address "all" of the identified needs on the Blackfeet Reservation, however, coordination & development will be one of the main focuses of the Project over the next year. The Blackfeet Tribe is presently preparing a Comprehensive Social Services and Law Enforcement Long Range Plan. This project will not only assist in the development of the Long Range Plans, but will back recommendation for needed Home Based Services. This Project will be placed with the "Babies First Project". Existing Staff will be blended in with the Home Based Project along with the Family Preservation funds received from the U.S. Government for Long Range Planning. The first year of operation will be the developmental phase with minimal services offered to families identified. The following objectives are proposed:

OBJECTIVE: (1) Organize and develop a Home Based Service Project on the Blackfeet Reservation by June 1995.

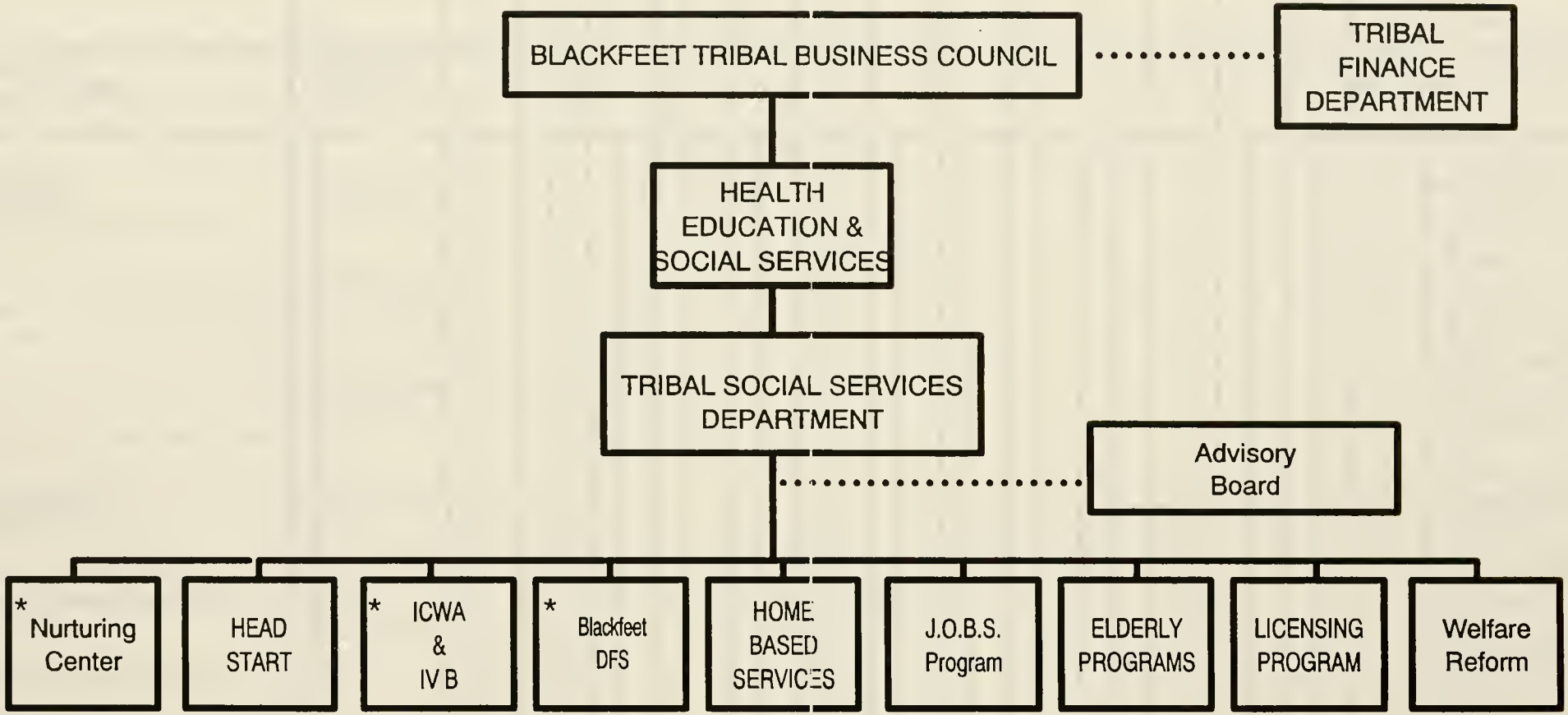
ACTIVITIES	PERSON RESPONSIBLE	MONTHS: 1st Month 2 3 4 5 6 7 8 9 10 11 12	YEAR 2	YEAR 3	EVALUATION
1. Hire Project Coordinator	HESS Comm.	X			1. Job Description, Resume, Documentation of Hire
2. Review objectives and materials for Advisory Board meeting. Attend monthly	Coordinator	X----on-going----		X	2. Minutes of mtg, training material, volunteer hours, new members.
3. Set up office & get equipment needed.	Coordinator	X			3. PaymentVouch -bids -financial rpt
4. Meet with appropriate Agencies on Mission & Objectives.	Coor/Asst.	X			4. Agency min. Handouts
5. Write Program Policies/ Procedures/Forms/Evaluation	Coordinator	X----X			5. Policy/Pro. Manual, Prog. Forms.
6. Train staff on: Program Objectives, Behavior Mgmt., Anger Mgmt., MANTT	Coordinator Licencee				6. Agenda Certificates Evaluation
7. Identify & Set up Resource of Agencies/people/Programs Materials coordinate Serv.	e	X----X			7. Resource Di -Meetings -Surveys (results)
8. Visit each community: Heart Butte, Seville, Babb, Birch Creek, Valier, Cut Bank, St.Mary's, Boarding School, Badger Creek	Coor/Asst.	X----on-going----X			8. Agenda Minutes Each Communit contact/Resou

OBJECTIVE: (2) To link the child and family with appropriate community agencies and individuals to create an on-going community support system by setting up a treatment plan for 15 families.

ACTIVITIES	PERSON RESPONSIBLE	MONTHS: 1	2	3	4	5	6	7	8	9	10	11	12	YEAR 2	YEAR 3	EVALUATION
1. Meet w/D.F.S./BIA/Social Services	Coordinator			X												1.Minutes of meetings, Agreement Forms etc.
2. Set up Family Criteria	Coordinator			X												2. Forms, Policies.
3. Meet with C.P.T. weekly	Coordinator			X												3. Meeting Attendance Sheet
4. Identify Resources/Services	Coor/Asst.	X	---	X												4. Community Needs Assessments. Long-Range Plan.
5. Set up Nurt. Parenting Program	Coordinator	X	---	X												5. Materials classes held (attendance) Class Evaluat
6. Meet w/Families for Assessment	Coord. & Assistant				X	---	---	X								6.Family File Assessments SocialSummary Meetings Mileage Log
7. Implement services with identified families.					X	---	---	---	---	---	---	---	---	X		7. Files, Dates/Service Financial Rec.
8. Identify Needed Services	Coord. & Assistant				X	---	---	---	---	---	---	---	---	X		8.Long Range Plan
9. Write for New Projects	Coord. & Supervisor				X	---	---	---	---	---	---	---	---	X		9. Proposals submitted & Programs written.
10. Complete Agency Case Planning	Coord.				X	---	---	---	---	---	---	---	---	X		10. Files

OBJECTIVE: (3) To identify and provide with at least ten (10) teen parents/ten (10) rural residents, that need Home Based services during Year One.

ACTIVITIES	PERSON RESPONSIBLE	MONTHS: 1 2 3 4 5 6 7 8 9 10 11 12	YEAR 2	YEAR 3	EVALUATION
1. Identify criteria to select families.	Coord. & Assistant	X---X			1. Forms, Criteria, and Pamphlets
2. Develop Assessment	Coord.	X---X			2. Assessment Form
3. Meet with individual clients identified.	Coord. & Assistant	X---X			3. Case File
4. Implement Home Based Services	Coord. & Assistant	X---X		X	4. Services Documented
5. Set up needed services	Coord., Supervisor Advisory Bd.		X	X	5.Program Document such as: Daycare attendance.
6. Write for needed services.	Supervisor Coordinator		X	X	Services Brochu Projects, Materi
7. Develop Support Group w/Families	Coord. & Assistant		X	X	7. Attendance sh meetings, topics Individual's Ass essments
8. Develop Resource Library for Families	Coord. & Assistant	X		X	8. Material List Checkout List Financial Document.
9. Complete Quarterly Rpts.	Coord. & Assistant				9. Reports -Financial -Quarterly -Narrative



* Also under Child Protection Services

The Babies First Advisory Members will be utilized for advise and direction. This Committee represents several agencies on the Reservation and rural community representatives. Refer to attached listing.

HOME BASED PROGRAM
ADVISORY BOARD MEMBERS

Criteria: Must attend meetings on a monthly basis. Committment to children & familes with volunteer input.

Present Members:

1. Karen Powell, President
   CHR/Alcohol Program
   Reside: 6 mi. N. Browning
   Represent that & Boarding School areas.

2. Kathy Momberg, Vice Chairman
   Blackfeet Parent/Child Center, Coordinator
   Reside: Badger Creek Area (also represent this area).

3. Georgia Matt, Secretary, B.S. Psychology
   Indian Child Welfare Act Director
   Reside: Valier

4. Wilma Speak Thunder
   Blackfeet Youth Program/Dev. Office
   Reside: Browning

5. Geneva Bird, Elderly
   Retired CHR
   Reside: Seville

6. Betty Ann Hall, Elderly
   CHR Program
   Reside: 20 mi. S. Browning

7. Shelly Morgan
   Heart Butte Center, Coordinator
   Reside: Heart Butte

8. Marilynn Olson
   Head Start Bilingual Teacher
   Reside: Babb

9. Wanda England
   Tribal Finance Monitor
   Reside: Birch Creek

10. Wynema Loring
    Entrepreneur
    Reside: Browning

11. Roberta Lane
    BIA Social Services
    Reside: Browning

BLACKFEET LAW AND ORDER
VISION

The Blackfeet Tribal Business Council Strategic Long Range Plan is a vision of improving the law and order justice system on the Blackfeet Indian Reservation.

Crime on the Reservation is a major problem that requires immediate attention. According to the New Tribal Law and Order Committee, **"There is a lot of crime on the Blackfeet Indian Reservation, some that is never reported, very little crime solved, and a court system that does not work".** This report proposes a start in addressing the law and order needs on the Reservation. Over the next two years, the Tribal Business council will make changes in the direction of new Policies and Procedures to be carried out by Tribal Programs to effectively reduce crime.

Tribal Business Council members realize that changes do not occur suddenly , however, broader efforts to reduce crime need to be addressed through a new, organized approach. The most important question lies with, how to control crime with minimum resources.

The Blackfeet Law and Order ***VISION*** includes the following:

*A justice community balanced approach to justice needs of all citizens on the Reservation;

*an approach that respects the dignity of all family members;

*strengthening and developing needed services and programs;

VALUES include the following:

*Leadership and teamwork

*Quality and improvement

*Respect

*Culture & Traditions

*On-going evaluations

INTRODUCTION

The Blackfeet Tribal Business Council developed the Law and Order Oversight committee to perform significant duties serving Blackfeet Reservation residents. One of the duties is to "develop a Strategic Plan for each Department". The purpose of this Strategic plan is to guide, develop, implement; and evaluate law and order programs. The Strategic Plan is a tool for on-going financial support and to provide a frame for collaboration and coordination with all agencies and departments. It is a dream that the following mission will be carried out:

MISSION

"to enforce the standards of conduct necessary to protect individuals on the Blackfeet Reservation, thereby creating a safe and healthy environment which facilitates social and economic growth and development."

Several documents will be utilized to complete the long range plan. These include; Tribal Court Review, October '92, Child Protection Team Reports; and Jail Evaluation. In addition, the Blackfeet Tribal Business Council established 20 goals, these will be referenced for unity within the government structure.

A strong law enforcement or judicial system can only exist with support from the community. Tribal Law and Order Oversight Committee has initiated several outlying community meetings to address the judicial needs of the Reservation community. These meetings have laid groundwork for the development of this plan.

ROLES:

The Blackfeet Tribal Business Council is the Governing Board. There are nine (9) elected members holding a two year term. The Tribal Business Council approves any new policies or major changes in law enforcement, they prioritize goals and give the Law and Order Oversight Committee direction.

The Law and Order Oversight Committee consist of four (4) elected Councilmen. This committee has the following roles:

(1.) The Law and Order must appoint a presiding officer that is willing to serve two (2) terms.

(2.) The Law and Order commission will develop a Tribal Strategic Law and Order Plan in conjunction with Program staff. This plan will outline the Tribal vision for law enforcement on the Blackfeet Indian Reservation.

(3.) The Law and Order Commission will establish an Advisory Board consist of at least five (5) community members to assist in the establishment of goals, objectives, quality assurance, and evaluate progress.

(4.) The Law and Order Commission will act as an advocate for legislative involvement for the advancement of judicial improvements by providing oversight testimony at the state and national level.

(5.) The Law and Order commission will provide community meetings to address needs, communication, and on-going support.

LAW AND ORDER COMMITTEE

The Law and Order Advisory Council will consist of five (5) community members. Individuals must apply for a position through the local Personnel Department. Representatives will be chosen from the following districts:

1. Browning (2 representatives)
2. Heart Butte (1 representative)
3. St.Mary's/Babb (1 representative)
4. Seville (1 representative)

Roles of the Law and Order Advisory Committee are presently being drafted by the Law and Order Oversight Committee Members with assistance from the Personnel Director.

PROGRAM AREAS

The Law and Order Committee is responsible for a number of programs that serve the Blackfeet Reservation. In support of the overall goals of the Tribal Business Council, the Law and Order Committee has reorganized programs by categorizing each Department.

The following Program areas will be addressed:

1. Administration of Law & Order
2. Four Judicial Systems:

   Federal, State, Tribal, and County
3. Police
4. Adult Court
5. Family Court
6. Juvenile System
7. Corrections
8. Prevention

ADMINISTRATION OF LAW & ORDER (1)

GOAL: **The Law & Order Commission will develop a Tribal Law and Order Department to assist in the development and implementation of the mission to enforce the standards of conduct necessary to protect individuals on the Blackfeet Indian Reservation.**

STATEMENT OF PURPOSE:

Historically, the Blackfeet Tribal Business Council did not set Law and Order as a priority with the Tribe. Presently there is no organization developed, Housing Department hires their own security, Bureau of Indian Affairs (BIA) Police are housed at the jail and under the direction of the BIA Superintendent. Juvenile Officers are under the direction of the Family Court Administrator. There is no formalized line of authority between programs and agencies.

In order to accomplish our goal to develop a Law and Order Department, a new Organizational Chart has been developed. The Law & Order Committee has created a new law and order umbrella. All law & order agencies will be under the direction of the Law and Order Department. The following objectives are proposed:

OBJECTIVES:

A. A Law and Order Department will be developed to include a Program Manager. This department will be under the direct supervision of the Law & Order Committee.

B. All Law and Order Agencies and Programs will be placed under one umbrella.

C. Administrators will be evaluated on their educational levels and program performance.

D. A Computerized Management Information System will be implemented.

JUDICIAL SYSTEMS
(2)

GOAL: **The Law and Order Department will do a comprehensive report on combining the four (4) Judicial Systems.**

STATEMENT OF PURPOSE:

The Blackfeet Reservation has a radius of 100 miles. Individuals on outlying communities complain that "it takes too long for a Police Officer to arrive". Seville District is on the outskirts of Cut Bank, Montana, however the County Sheriff does not have any powers to arrest individuals breaking the law because it is on the Reservation. There are four (4) major Judicial Systems:

I. FEDERAL

(A) The Federal Bureau of Investigations (F.B.I.) has control of major crimes on the Reservation. However, the nearest F.B.I. Agent is located in Great Falls, Montana which is 120 miles from the Reservation. Pursuant to congressional enactment, the so-called major crimes on the Reservation when committed by or against an Indian, are governed by Federal law. Consequently, the F.B.I. has a Reservation presence. However, while this agency has primary investigative authority for such crimes, "Indian Country Crime" is not an internal priority for the F.B.I.

(B) Bureau of Indian Affairs (BIA) has two separate law enforcement units on the Reservation, Criminal Investigators and Police. There are three (3) Criminal Investigators located on the Reservation. Their primary role is to investigate major crimes, however, all evidence is given to the F.B.I. Agent, and they redo the investigation when they can make it to the Reservation, usually weeks later.

(C) BIA Police - BIA Police are the main police force on the Reservation. They are funded through the Bureau of Indian Affairs. Their primary focus is to keep peace; apprehend law violators; and patrol the Reservation.

(D) I.H.S. Security - Indian Health Service employs their own Security Officers. They have minimal powers and only patrol the Indian Health Service unit.

II. STATE

(A) State Police - Highway Patrol Officers regulate the traffic on the main highways through the Reservation. Although the Highway Patrol Officers assist BIA Police, there is no formal agreement on services with the Blackfeet Tribe.

III. COUNTY

The Sheriff Department is located in Cut Bank, border town of the Reservation. The Sheriff does not have any jurisidiction over the Reservation. The County at present has 5 working Deputies that patrol and are responsible for the entire law enforcement in the county. This includes maintaining the jail in Cut Bank, and providing services to the county which are mandated by State Law. Approximately two - thirds of the county are within the exterior boundaries of the BlackFeet Indian Reservation, there is at present no working agreement between the County and BlackFeet Tribe for law enforcement services or law enforcement assistance thus creating a gap in services to all citizens of Glacier County by in the inherent threat of potential law suits against the Sheriff, County, and the County Officer involved for taking action against an enrolled tribal member, even while assisting the Bureau of Indian Affairs Police in the performance of their duties. It is also possible for potential law suits to arise when county officers respond initially to calls that come from enrolled tribal citizens and they must take action to safe guard the citizens and themselves. There are three deputies that are stationed within the exterior boundaries of the reservation and two deputies in Cut Bank and they are sometimes called to respond to situations that involve members and they cannot take any action because they don't have Jurisdiction. For the officers to better do their jobs and to protect all citizens of the county and also themselves there must be an accord reached between the County, Tribe, and Bureau of Indian Affairs which will enhance services to all residents of Glacier County.

IV. TRIBAL

1. Blackfeet Tribe is in the process of developing a Tribal Law and Order Department. Presently, the following Police Agencies are under the Tribe.
   (a) Juvenile Department
   (b) Game Warden Department
   (c) Tribal Security Department
   (d) Child Protection Officers Department
   (e) Housing Police Department
   (f) Tribal Police

The above programs all have minimal police duties.

STATEMENT OF PURPOSE:

The four (4) Judicial systems on the Blackfeet Indian Reservation have brought confusion with community people. Community individuals are "stunned" when the Sheriff arrives and cannot arrest, Criminal Investigators are constantly blamed for "not investigating", when it is the primary role of the F.B.I. The F.B.I., located in Great Falls, 120 miles south of Browning, many times do not respond until weeks or months later. The local police (Bureau of Indian Affairs) are overwhelmed by the number of calls to respond to and due to the lack of manpower many officers have suffered "burn out" and call in sick., thus resulting in diminished law enforcement services to the BlackFeet Reservation. Tribal Juvenile Officers are expected to handle all juvenile crimes, however, they lack personnel, trained staff, out-dated or lack of equipment, or no equipment at all.

Other agencies not mentioned are the U. S. Border Patrol, U.S. Customs, and Department of Immigration that work in proximity to the Blackfeet Reservation that borders Canada. The State Highway Patrol regulates traffic on the main highways through the Reservation. They have stressed confusion and frustration with the Tribal

Court system. Judicial jurisdictional conflict often arises among agencies. There is no formalized plan to enhance the efficient use of all agencies in maximizing the use of critical resources.

OBJECTIVES:

1. A task force will be developed, to outline interagency agreements.
2. The Blackfeet Tribal Council will request technical assistance from the National Justice Center to seek coordination and bring the "judicial systems together" to better serve the community.

POLICE
(3)

GOAL: **Policing within the Reservation will be supported through added resources and coordination with all Programs to enhance police functions.**

STATEMENT OF PURPOSE:

The primary purpose of Law Enforcement Services is two-fold: First, to enforce all applicable law within the Blackfeet Reservation to ensure the protection of the public and community safety; and second, to respond to reported crime in a timely, effective manner, including prompt effective prosecution or other acceptable case disposition. The

police are also expected not only to maintain the peace, prevent crime, serve, protect, direct traffic, stop street alcoholics, take inebriated individuals into custody, and so on. The list is very long and complex.

The American Bar Association developed a list of functions of the police, their responsibilities is impressive. They listed the following duties:

1. to prevent and control conduct widely recognized as threatening to life and property
2. to aid individuals who are in danger of physical harm, such as the victim of a criminal attack
3. to protect constitutional guarantees, such as the right of free speech and assembly
4. to facilitate the movement of people and vehicles
5. to assist those who cannot care for themselves: the intoxicated, the addicted, the mentally ill, the physically disabled, the old, and the young
6. to resolve conflict, whether it be between individuals, groups of individuals, or individuals and their government
7. to identify problems that have the potential for becoming more serious problems for the individual citizen, for the police, or for the government
8. to create and maintain a feeling of security in the community

The recent history of actual law enforcement efforts on the Blackfeet Reservation has been one of too few officers, who were generally under trained, under equipped, and over-worked. Reservation residents have long complained that law enforcement's response to reported crime was generally too little, too late. Even in Browning (where all facilities are located), the police response has often been non-existent. Residents in the outlying communities have complained that calls to the police are answered too late or not at all. A lack of coordination, too little manpower and arguments over "turf" or jurisidiction have contributed to this lack of police presence.

OBJECTIVES:

1. To organize the Police Force under the overall umbrella of Law Enforcement.

2. To develop and create units or functions with policies within the Policing Department for better organization. These include, but not limited to the following:

ORDER MAINTENANCE

PEACE KEEPING OFFICERS, TRAINED TO RESPOND TO DRUNKEN HOUSE PARTIES, DRUNKS ON THE STREET, BAR FIGHTS, ETC.

LAW ENFORCEMENT

DRUG VICE-SQUADS (Organized police group, trained)

TRAFFIC DIVISION

SEXUAL ABUSE TEAM (Respond to any sexual abuse crime in organized fashion)

SERVICE FUNCTION

RESCUE ANIMALS

ASSIST SOCIAL AGENCIES/REMOVE CHILDREN

DOMESTIC DISPUTES

3. To develop a comprehensive Recruitment/Training Program for Police Officers to include Qualifying Standards.
4. Enhanced equipment for better performance and response to reported crime.
5. Development of working agreements with other agencies including the State and Federal agencies with law enforcement presence on the Reservation.
6. Development community watch programs and groups.
7. Development of specific protocols for response to reported crime to avoid any jurisdictional conflict, and still address the reported incident.
8. Development of police sub-stations in all the outlying communities.

COURT SYSTEM
4. ADULT 5. FAMILY

GOAL: **To provide an organized Judicial Court System that meets court standards.**

STATEMENT OF PURPOSE:

In recent years, the criminal function of the Tribal court has become non-functional. Cases are not filed by the Tribal Prosecutor, witnesses fail to appear, jury trials are not held as guaranteed by the law, and Tribal Judges appear to be unaware of or unwilling to follow the law of the Tribe and Indian Civil Rights Act. In cases that do manage to make it judges and the prosecutors seem to lack an understanding of the elements of the crime, and punishment is often unequal and not designed to meet the crime. Excessive bonds are used as punishment instead of ensuring the appearance at trial of the alleged defendant. In the area of criminal law, the Tribal Code itself is often inconsistent and incomplete. A comprehensive court review was completed with suggestive changes, these need to be taken into consideration.

In the area of Judicial Services, the following objectives are proposed:

1. Reorganize present court system to follow Court Standards.
2. Increased training for Tribal Judges, and future selection, retention and evaluation of judges based upon their actual performance and qualifications.
3. Review and re-write Tribal Codes to be more consistent, workable and complete.

4. Computerized clerks office to create a more manageable office leaving more time for work related to jury cases.
5. Development of community educational material on the importance of and role of juries in a criminal justice system.
6. Development of traditional cultural methods of dispute resolution and for the punishment of criminal offenders.
7. Long term commitment to have the services, either permanently or on contract of attorney judges and attorney prosecutors.
8. Computerized library with updated materials or access to law materials.

JUVENILE SYSTEM
6.

GOAL: **To develop and implement a Juvenile Department.**

STATEMENT OF PURPOSE:

Over the past two years, Juveniles committing crimes is climbing. The newly formed family court has enhanced the overall prosecution of juvenile crimes. However, there is a lack of personnel, finances, accountable defenders, and a major need for equipment. Officer need on-going training and assistance in transporting youth to cities for treatment, etc.

OBJECTIVES:

1. Develop a Long Range Juvenile Justice Plan to include rehabilitation services for the entire family.

2. Identify resources and grants for funding.
3. Work in conjunction with Montana Board of Crime Control for Management Information Systems and networking with State Juvenile System.
4. Hire and train qualified Juvenile Officers.
5. Coordinate Juvenile Officers with police force.
6. Develop services and programs for juveniles and families
7. Develop comprehensive probation program for juveniles with adequate staff.

CORRECTIONS
7.

GOAL: **To develop a correction system for punishment, deterrence, incapacitation, and rehabilitation.**

STATEMENT OF PURPOSE:

Blackfeet jail has been condemned numerous times however, no detailed correction plan has been developed. The jail is crowded, outdated, and not fit for human beings. There is no place to house juveniles that commit crimes.

OBJECTIVES:

1. Develop task force to do correction plan for Blackfeet Tribe.
2. Identify consultant to write plan.
3. Develop and complete rehabilitation plan with Family Services.

PREVENTION
8.

GOAL: **Law and Order Committee will assist in the development of a Prevention Plan for Law and Order.**

STATEMENT OF PURPOSE:

Prevention has never been priority within the Tribal government structure. The Tribe receives various funds for prevention, however these funds are not coordinated.

OBJECTIVES:

1. Develop Prevention Plan to include D.A.R.E., Law Related Education, and other programs.
2. Actively seek finances for prevention programs. Develop fund-raising individual to write grants.

CONCLUSION:

In recent years, due to many factors, the Blackfeet Indian Reservation has become almost a lawless land. Believing that the ultimate fate of the Reservation lies in the hands of its people, the Blackfeet Tribal Business Council has developed this Strategic Long Range Plan for Law and Order. The Plan is based upon the existing available resources and data available to the Tribe.

While maintaining its flexibility and mindful of its obligation to be responsive to the needs of its people, the Blackfeet Tribal Business Council hopes to serve the purposes of prevention, deterrence and rehabilitation in the area of criminal justice on the Blackfeet Indian Reservation.

In so doing the Tribe intends to achieve its ultimate Mission:

To enforce the standard of conduct necessary to protect individuals on the Blackfeet Indian Reservation, thereby creating a safe and healthy environment which facilitates social and economic growth and development.

MEMO

TO: Jo Acton
Betty Petek
Jani McCall
Dave Pierce

RECEIVED - DFC
DEC 22 REC'D
CENTRAL REGION

FROM: Barbara Sample

DATE: 12/21/94

RE: Attached Draft

Please review draft of letter and attachments that will be sent to Region III rural commnities and respond ASAP. Any corrections suggestions, etc. will be appreciated. My Fax number at Family Support Network is (406) 256-9879.

Thanks for your cooperation.

Child Protection Team:
(Name of Community)

Dear :

Recently, Family Preservation dollars became available to our state through the federal Family Preservation and Family Support Act. The Department of Family Services has determined that communities are best suited to assess their needs and to submit proposals to access these dollars. The Region III DFS Advisory Council has recommended that these dollars be made available to rural communities exclusively.

There are several pages included with this letter which briefly provide the parameters of the grant, as well as a two page form, which your community members are invited to discuss and submit for review. Part of the Family Preservation Act requires that a "wide range of appropriate public and nonprofit private agencies and community based organizations, including parents, participate in the development of the proposal." A suggestion for accomplishing this includes a brainstorming session with community members to complete the brief proposal outlined in this packet of information.

These brief proposals will be reviewed by the Preservation subcommittee of the DFS regional council. Two communities will be invited to develop a complete proposal. Technical assistance will be available at that point in the process to allay the burden of the actual proposal development.

The anticipated timeline for this effort is as follows:

Brief community proposal submission:	2/28/95
Selection of two communities for full proposal development:	3/15/95
Technical assistance to two communities:	3/15-4/15/95
Full proposal submission including budget:	4/30/95
Proposal review by subcommittee:	5/1-6/1/95
Startup date:	7-1-95

You are invited to submit a brief overview proposal as the first step in this process. No proposals submitted after 2/28/95 will be accepted. If you have any questions you may call me at the Regional Office, 252-5601 or call Barbara Sample of the subcommittee at the Family Support Network, 256-7783, or at the Family Liaison Project, 256-1706..

Sincerely,

Betty Petek

Cliff Murphy

KEY INFORMATION FOR APPLICATION

Key information to help develop a two page prospectus of your community's anticipated proposal.

Targeted communities: Region III Rural communities

Project parameters: The purpose of these dollars is to assist families maintain children in the home environment over the long term. All proposals must seek to accomplish this (i.e. non-residential services).

Budget information: It is anticipated that approximately $25,000 will be made available to two rural communities who will be selected from the prospectus submitted by each community. Selected communities will be asked to submit a complete proposal. A match of ??? is expected in the first year of the proposal and increases of ??% each successive year.

Priority group information: The preservation subcommittee prioritized the following factors as key to the proposals. Children and families may have one or more than one of these. Children living in poverty, unstable housing--no phone, mental health problems experienced by one or more family members, substance abuse by one or more parents or family members, parent(s) experiencing social isolation, domestic violence. The subcommittee emphasized that families served by the proposal are either, presently, not served or underserved, and have limited historical contact with the system.

Family Preservation Principles in Title IV-B, subpart 2 of the Child and Family Services program of the Social Security Act.

Develop a child and family service system that:

- keeps children and family members safe at all times
- builds on the resources and strengths of families
- offers a continuum of services to children and families that is family-focused, easily accessible, and respectful of cultural and community characteristics;
- links the child and family continuum of services to other community child and family services and service delivery systems (e.g. mental health, education, housing, substance abuse prevention) and the courts, to ensure that families have access to comprehensive services to meet their individual needs.

Brief Proposal
Family Preservation Grant

Date Submitted:_____

1. Briefly outline the project, identifying the key components:

2. List three specific ways your project will meet the family preservation principles:

a.

b.

c.

3. Identify the risk factors which your project will address:

a.

b.

c.

d.

e.

4. Briefly review anticipated source of matching funds during the first year of the project.

SECTION 1 - FACE SHEET

A. Request for Proposal for Rural Family Preservation: Families United

B. Applicant Agency

Name Families United

Address 613 5th Avenue South **Phone:** (406) 538-7871

City: Lewistown **County** Fergus **Zip** 59457

C. Taxpayer Identification# 81-0390318

D. Private-Non-Profit Yes ____ **No** X **Attach documentation if yes**
Currently awaiting completion of 501C3 non profit status.

E. Project Director

Name Nena Kulka **Title** Project Director **Ph** 538-7871

Address 613 5th Avenue South **City** Lewistown **Zip** 59457

F. Project Title: Families United

G. Project Duration **Start-up** 7 / 1 / 95 **Finish** 6 /30 / 96

H. Match Support $ 6,250.00 **Sources** Magic Forest Child Care Center- Office Space
Meeting Space for Group Meetings and
Child Care Space during meetings.

SECTION 2 - PROJECT BUDGET

A. PERSONNEL	**$**
Nena Kulka	8,500.00
Sharon Napier	8,500.00
employee fringe benefits approx $1,500 each **TOTAL**	$20,000.00
B. CONTRACTED SERVICES	**$**
Child Care	$1,000.00
TOTAL	$1,000.00
C. TRAVEL AND PER DIEM	**$**
Transportation	$1,160.00
Insurance	840.00
TOTAL	$2,000.00
D. EQUIPMENT	**$**
Copier Sharp Z82II	$1,000.00
TOTAL	$1,000.00
E. OPERATING EXPENSE	**$**
Phone	$ 500.00
Office Supplies	250.00
Copies	400.00
Misc Expense plus Food Expense **TOTAL**	300.00 1,450.00
F. TOTAL PROJECT	**$** 25,000.00
G. MATCH Magic Forest Child Care	**$** 6,250.00

RURAL FAMILY PRESERVATION

Section 3

GRANT APPLICATION BUDGET NARRATIVE

1. Personnel

   a. How were salary rates determined? As Parenting Co-facilitators we have been reimbursed at a rate of $10.00 per hour for our services. Even though our work descriptions have changed we feel that this rate of pay is satisfactory.

   b. What is included in fringe benefits? The fringe benefits will include the following payroll taxes; FICA, SS, State, Medicaid, OFLT. We computed these amounts at 15% of salary.

   c. What function does budgeted employee perform? We will organize and co-facilitate a parent support group and family activities, we will serve as home-visitors, we will help families to assess their strengths and act as a liaison between parents and the community, we will assist parents in coordinating needed community services, and we will advocate for parents and families.

2. Contracted Services

   a. What is the daily fee for consultant? Approximately $25.00 per group meetings (scheduled 40 meetings per year).

   b. How many days will service be provided? Approximately 40 weeks per year.

   c. What service will be provided? The child care component (which would be administered at the same time as Group Time) is a nurturing developmentally appropriate activity to enhance child's self-esteem and to work in the same subject matter as the parents for the same week. The child care will include provisions and curriculum addressing each child's social, emotional and intellectual growth. The children will be provided with an educational environment to facilitate significant and long lasting changes to increase positive parent/child interactions and to sharpen skills in the areas they choose.

3. Travel and Per Diem

   a. Indicate mileage and per diem calculations using state rates. For 40 group meetings x 12 miles estimated round trip = 480 miles x .29 cent per state rate = **$140.00**. 10 miles round trip x 20 group or other meetings = 200 x 1.35 (cost of contracted services) = **$270.00** per year. One round trip to Denver for training and workshops in child abuse prevention is 1,400 miles x .29 cents state rate = **$406.00** plus per diem of $ 23.50 per day per person (approximately 3 days) = **$141.00**, 400 miles in state travel x .29 cents in state rate = **$116.00** plus 2 per diem rates = **$31.00** with **$56.00** to cover unexpected travel expenses.

   b. Is mileage and per diem directly related to project activities? Yes, these funds will be used for continuing education and support for the home-visitors. Also, a portion of the funds will be used for transporting families to needed services and to participate in special family activities.

   c. If out-of-state travel is anticipated, give particulars, i.e. location, state, dates, purpose, etc. No, except for one workshop in Denver, Colorado in the Fall of 1995 for enhancing our skills in child abuse prevention and home-visitor programs.

4. Equipment (Expendable supplies must be included under "Operating Expense")
   a. Description of equipment; make, model, etc. Sharp Z-82II copier.
   b. What is unit cost? $999.99.
   c. Equipment must be integral to project success. This equipment is integral to project success because it will be used to make: Activity Calendars for parents support groups, notices to our families, and parenting or related information they may request to enhance their skills.

5. Operating Expense

   a. Expendable supplies, monthly phone charges, rent, etc. Copy paper at $400.00 yearly; routine office supplies estimated at $250.00 yearly; $41.67 estimated monthly phone charges; office space is an in-kind contribution; auto insurance averaged at $35.00 per home-visitor per month totalling $840.00 yearly; and miscellaneous expenses such as food and beverages for group meetings $300.00 yearly.

6. Total Project

   a. We are requesting a $25,000.00 yearly budget for our Rural Family Preservation Program.

7. Match

   a. Magic Forest Child Care Center has agreed to donate space for child care services to be provided and space for the group meetings at 40 meetings per year. They have also agreed to provide office space. All totalling $6,250.00.

GRANT APPLICATION PROJECT NARRATIVE
RURAL FAMILY PRESERVATION

Section 4

1. Needs Statement - Our community does not currently provide a home-visitor program or a parenting support group to meet the needs of our parents who live in poverty, have unstable housing conditions, mental health issues, suffer from domestic violence, or live in social isolation.

2. Goal - To empower the families to problem solve, encouraging them to express themselves in a sociable manner, provide opportunities to raise their self-image and to build their self-esteem; thus they will be more able to focus on their strengths and to improve in their weak areas helping to reduce abuse. In addition our focus is to provide a peer to peer support group and informal networking for our families.

3. Objectives -

    a. Use a Families Strengths & Needs Tool to access families and the group.
    b. By using and building upon the families strengths and being aware of their needs, provide appropriate choices for group discussion.
    c. Visit with the Family in their own environment to encourage independence.
    d. Using community resources available, provide a Resource Directory for services each family may need or want more information on and provide opportunities to acquire knowledge and grow.
    e. Initiate and maintain a Cooperative Agreement between "Families United" and community agencies allowing each to share information that may assist the families we serve.
    f. Always use choices and focus on each families strengths to encourage self-growth and empowerment.
    g. Build each person's self-esteem by acknowledgement, validation, sharing, allowing growth using praise and providing a support network to each family. This will relieve stress and prevent potential abuse.
    h. Provide an environment to get families needs met thus reducing abuse and to provide educational materials according to individual needs.

4. Implementation Plan - We will interview and do an assessment with the families individually to identify strengths and weaknesses. Then with all the information we have available we will classify the family in three categories as follows:

Category	Classification
Class I	Severe/Crisis
Class II	Moderate
Class III	Minimal

Class I: Severe/Crisis; this family will receive the priority and will be guided in their choices for group and Home Visiting. Home Visits will be for crisis intervention only for the first few weeks; then:

Reassessed (needs are re-evaluated to see if needs are being met or to find out what other resources need to be incorporated. Also we will use this time to point out growth and direction. (This is going on constantly but this re-assessment will be formal after the first three months)

Class II: Moderate; This family will receive second priority and will also be guided in their choices for group and Home Visiting with the Home Visitor empowering the client in their ability to make choices.

Re-assessed formally and reclassified as the situation changes.

Class III: Minimal; This family will receive third priority. The client will be empowered in making choices.

Re-assessed formally - and reclassified if the situation changes.

Each client will have the opportunity to receive 1 hour of group per week (with structured Child Care simultaneously). They will also receive a Home Visit approximately 40 weeks per year. The other 12 weeks will be used as integration time for the family to incorporate, process and use the skills they have learned.

Crisis Intervention
More hours may be needed for crisis intervention. However, since our major goal is to empower the families to problem solve, provide opportunities to raise their self-image, build their self-esteem and focus on their strengths, this should be needed in the early stages only. (Optimistically).

5. Evaluation/Assessment - Tracking records will be coordinated with the Fergus County Department of Family Services. A statistical report will be made available for review and as an assessment tool to measure success. We will follow each family for a one year period and provide a success rate analogy for future goals. We feel our success will also be measured by the number of families that we are able to keep united.

6. Future Funding Plan - Families United is currently seeking a 501C3 status and inquiring about alternate funding and grants available for child abuse prevention and parent support groups. We will actively be seeking opportunities to apply for grants and funding through private individuals and corporations dedicated to our cause.

SECTION 5 - SUBGRANT CERTIFICATION PAGE

*The officials who certify this document agree to adhere to all terms and conditions relating to this application. Duplication of responsibilities by one individual for the positions listed below is not acceptable. **ONLY ORIGINAL SIGNATURES ARE ACCEPTABLE.** Please see Guidelines regarding signatures.*

A. OFFICIAL BUDGET REPRESENTATIVE **(City/County Commissioner, Mayor, Dept. Hd)**

TYPE/PRINT NAME_____ **TITLE**_____

ADDRESS_____ **CITY** _____

ZIP CODE_____ **PHONE**_____

DATE_____ **SIGNATURE**_____

B. PROJECT DIRECTOR

TYPE/PRINT NAME Nena Kulka **TITLE** Project Director

ADDRESS 613 5th Avenue South **CITY** Lewistown

ZIP CODE 59457 **PHONE** (406) 538-7871

DATE 4-19-95 **SIGNATURE** Nena Kulka

C. FINANCIAL OFFICER

TYPE/PRINT NAME Sharon Napier **TITLE** Financial Officer

ADDRESS 613 5th Avenue South **CITY** Lewistown

ZIP CODE 59457 **PHONE** (406) 538-7871

DATE 4-19-95 **SIGNATURE** Sharon Napier

D. CLERK/CLERK & RECORDER
(Cities & Counties Only)

TYPE/PRINT NAME_____ **TITLE**_____

ADDRESS_____ **CITY** _____

ZIP CODE_____ **PHONE**_____

DATE_____ **SIGNATURE**_____

FAMILY PRESERVATION GRANT PROPOSAL
STILLWATER COUNTY

I. PROJECT KEY COMPONENTS:

To develop a networking system within the community that will provide early intervention to families at high risk of involvement with Department of Family Services and the court systems. The focus of the program will be directed towards empowering the family and creating family stability.

II. GOALS TOWARD FAMILY PRESERVATION PRINCIPLES:

A. Creation of an easily accessible family respite system with mediation and follow up services.
B. Provide families with a Home Visitor Program to develop and teach skills through building on the family's strengths.
C. Develop a community resource network through a monitoring and referral team that will track identified families and link them with a continuum of community-based services that include:
    1. counseling and evaluations not covered by insurance or Medicaid.
    2. reference library for family empowerment and education.
    3. mentoring system for children and families which include peer-counseling within the home and a tutoring program.
    4. remove barriers to utilization of services by providing transportation costs, babysitting costs, etc.

III. IDENTIFIED FAMILY RISK FACTORS:

A. Homeless children (teens) or those living with non-parent individuals addressed through respite, mediation and an in-home mentor.
B. High school dropouts by providing family stability, tutors and mentors.
C. Family violence through in-home visitors that will teach basic parenting and communication skills, respite services, mediation and an emergency alert system.
D. Address community isolation through a referral team that functions as a community response team, which will identify, track and links targeted families with community services.

IV. ANTICIPATED FUNDING SOURCES:

Anticipated funding sources within the community are: service clubs, community industry, community volunteers, donated materials and perhaps a VISTA volunteer.

SECTION 1 - FACE SHEET

A. **Request for Proposal for Rural Family Preservation:** Family Preservation Request

B. **Applicant Agency**

Name Child Protection Team/Stillwater County Commissioners

Address P.O. Box 456 **Phone:** 322-4821

City: Columbus **County** Stillwater **Zip** 59019

C. **Taxpayer Identification#** 81-6001432

D. **Private-Non-Profit -Yes** _____ **No** X **Attach documentation if yes**

E. **Project Director** * Will become Project Coordinator when hired... See Job Decription at end of Application

Interim Director: (Contact Person)

Name Lanny Stene **Title** Sp. Ed. Coop Dir. **Ph** 322-5373

Address P.O. Box 899 **City** Columbus **Zip** 59019

F. **Project Title:** The Family Tree

G. **Project Duration** 1 year **Start-up** 7-/ 1 / 95 **Finish** 6 /30 / 96

H. **Match Support** $ 6250 **Sources** In-kind contribution through local entities; ie. schools, local business, cooperating agencies, etc.

SECTION 2 - PROJECT BUDGET

A. PERSONNEL There will be no personnel expense as all services will be through contracted services or volunteers. $ 0

employee fringe benefits

TOTAL $0

B. CONTRACTED SERVICES $ 20,050

Project Coord.= $12,000 Outside therapists= $6000

Respite home and daily respite costs = $2050

TOTAL $20,050

C. TRAVEL AND PER DIEM $ 3,400

$ .29 reimbursement for Director and volunteer personnel

TOTAL $3,400

D. EQUIPMENT All equipment is donated and would be considered an in-kind contribution. $

TOTAL

E. OPERATING EXPENSE Library materials, training materials, telephone expenses, forms and supplies. $ 1550

TOTAL $1,550

F. TOTAL PROJECT $ 25,000

G. MATCH $ 6,250

STILLWATER COUNTY
RURAL FAMILY PRESERVATION GRANT
FOR 1995-96

Section 2-Project Budget

A. Personnel	$0
B. Contracted Services	$20,050
C. Travel & Per Diem	$3,400
D. Library	$800
E. Miscellaneous Costs	$750
Total	$25,000

CONTRACTED SERVICE

A. Contract with a counselor to field and follow-up all referrals, train volunteers, report to Child Protection Team, initiate and sponsor a support group for parents.
Contract Costs $12,000

B. Contract with counselors to provide county wide services.
Contract Costs $ 6,000

C. Contract with a family to provide respite care.
Contract Costs $ 2,050
(1) $50 per month stipend
(2) $15 per day-8 days per month, days not used to be carried over

SECTION 3-BUDGET NARRATIVE

A. Personnel N/A

B. Contracted Services

The Stillwater County Project will utilize three different contracts. Each contract is designed to meet the varying needs of our families. Each contract will differ, but will identify the specific purposes outlined by the Child Protection Team. An explanation of the contracts and the allowable funding for each was determined by the Child Protection Team. The concept and the cost are listed below.

1. Salary rates were determined by a task force team appointed by CPT. As stated above CPT will contract have three areas in which contracts are be to developed. The contracts will total $18,050. The contracts are:

A. A monthly contract with a CDC Counselor to serve as Director of services. The contract is for $1,000 per month for 12 months.
B. Contract with counselors from Stillwater County, Mental Health Center, and the surrounding areas, $6,000. Counselors will be notified of our program and individual contracts will be issued to each at a negotiated cost.
C. Contract with a family to provide respite care. The family will receive a $50 per month stipend, plus $15 per day up to 8 days per month. Total contract costs is $2,050.

2. The Director, who is on the monthly contract, will provide services as needed. The other contracts will be utilized also as needed. The respite care does have an initial limit of 8 days per month. Depending on usage, we may see either an increase or decrease in certain months, but the maximum is 96 days per year.

3. The CPT plans to contract with a certified CDC Counselor to serve as Director. The Director will receive and follow-up referrals from our field sources. The Director will be responsible for the following activities:

A. To receive referrals and act on referrals from CPT.
B. To determine the families immediate needs and plan an intervention plan accordingly.
C. Provide families needing counseling or mediation services with a list of potential counselors and their expertise.
D. To make the determination to whether the family is in need of respite care.
E. The Director will be responsible for having each family agreeing to our

services by signing a contract before any additional services will be pro-provided.

F. The Director will train volunteers to provide mediation services to select families identified by the Director.
G. The Director will initiate and sponsor a support group for parents.
H. The Director will seek out pertinent information and materials to be placed in the library for usage by our families.
I. Coordinate the services and the families.
J. Report monthly to the CPT. Each member of the CPT signs a confidentiality statement before each meeting to protect families. Volunteers that are used in our project will be trained in confidentiality requirements.

C. Travel and Per Diem

1. Cost $3,400 per year based on $.29 per mile.

2. At this time we are looking at reimbursing our Director and volunteers. Columbus will be the home base for our Director. Hopefully volunteers can be found in each region of the county. Mileage and per diem will related directly to the costs of providing services to our families. Per diem for volunteers will only be allowed if it is related to training. The Director will be allowed per diem, but it must be approved each month by the CPT.

3. No out of state travel is anticipated.

D. Equipment

1. This project has the opportunity to use equipment donated in-kind from organizations represented within the CPT.

E. Operating Expenses

1. This project includes a budget of $750. This amount will be used for telephone charges incurred by the Director, operating supplies, forms, and to cover costs that have not been identified in this narrative that could and probably will arise.

NEED STATEMENT

Stillwater County is somewhat unique, as it enjoys a fairly low unemployment rate, due to the Stillwater Mine and Smelter. The impact of having extractive industry also places heavy demand upon local economy and services. The mine currently employs 450 people and this number is expected to increase to 600 employees within the next two years. A percentage of the mine worker population lives a somewhat transient lifestyle, with a high rate of substance abuse. As the county is experiencing increased population, there is a noticeable cut in services, due to funding cuts. For example, the Columbus branch of the Mental Health Center has cut back to a part time substance abuse counselor and a part time psychologist. Stillwater Alternatives currently employs a full time manager with a part time substance abuse counselor in Stillwater County two days per week. Feedback from local service providers and government agencies indicate the following issues within our county.

The Absarokee school system reports that over 5% of junior high and high school students are not living with either parent. Substance abuse is on the rise, with an increasing amount of arrests for Criminal Possession of Dangerous Drugs and drug paraphernalia charges. The Minor In Possession substance abuse education caseload is currently at 23 students, 7 of which are repeat offenders. Domestic Abuse arrests are on the increase, with 5 couples currently receiving Anger Management counseling. Schools are reporting a noticeable increase in new students moving into the county from other states, many of whom are relocating to escape the youth gang problems in larger urban areas. Due to the dramatic increase in population, the cost of housing has also increased, making it difficult for those not employed at the mine to find quality housing at an affordable price. Many of these people are locals, dependent upon an agricultural economy, with wages in the minimum wage bracket and unable to afford services. Further blocks to use of services are availability of services, therefore potential clients would need to travel to Billings for services.

The formation of the Family Tree program will address availability of services by bringing many programs into family homes, thus saving time, distance and transportation problems for potential clients thus assuring that services are not lost due to these services not being taken advantage of.

GOALS AND OBJECTIVES

Goal:

To decrease the involvement of the criminal justice system and Department of Family Services with families in the county, at the same time increasing a continuum of services that focus on prevention versus crisis intervention. Currently, some basic services exist within the county, however are not being utilized due to time, distance, transportation and cost of services. The Family Tree program will bring in new services, organize and develop local resources in order to make these services accessible to residents of Stillwater County.

Objectives:

1. Initial crisis intervention with subsequent mediation provided to eight (8) families within the first year.

2. Provide in-home visitors to teach basic parenting and communication skills to eight (8) families.

3. Provide mediation counseling and teach basic skills through in-home visitors to three (3) families, resulting in the reunification of the family.

4. Provide respite care with required follow up services to five (5) families.

5. Develop a Home Visitor program comprised of four (4) volunteers throughout the county who are able to teach skills that build on family strengths.

6. Develop a resource pool of local service providers who will provide services contracted. $6,000.00 will be set aside to pay the cost of counseling for those families who do not qualify for Medicaid nor have insurance.

7. Develop a community resource network with four representatives from the Stillwater County Child Protection Team that will track identified families and link them with a continuum of services that address client's specific needs. Reports will be given on a monthly basis to the Child Protection Team.

8. Develop a resource library that will be located at the Stillwater County Library. Resource materials will consist of purchased and donated material.

9. Develop a volunteer resource pool comprised of Teen Institute graduates and Natural Helpers from county schools, along with other interested persons who's skills are developed to provide peer counseling, tutoring and support network. This pool will address student drop-outs, substance abuse and family issues.

10. Develop one (1) contracted Respite Home that will provide respite care to a targeted population of 12 to 17 year olds for up to eight (8) days per month, or 96 days per year.

11. Provide three (3) contribution sources that will provide computer services, printing, copy machine, donated time, advertisement and recruitment.

12. Involve the TAXI volunteer program through the Stillwater County Extension Service and 4-H Council.

IMPLEMENTATION PLAN

The Stillwater Child Protection Team (SCPT) will oversee the program and act as a resource for the Project Director. Referrals will be routed to the SCPT and/or the Project Director. The situation will then be assessed and the Project Director will decide upon options from several that are available.

If the case was referred through the Respite Care Home, family mediation is required, along with basic skills being taught in the home, and the possibility of counseling with certified therapists. Another option would be family education provided by the Project Director and the In-Home Volunteer Program, supported by peer counseling and tutoring. Peer counseling for youth will be provided by the members of the Teen Institute and Natural Helpers programs in the local schools. All programs will be supplemented with the Resource Library and qualified therapists.

TIME LINE

A. One to four months:

1. formation of the board from SCPT members.
2. appoint Project Director.
3. advertising through local paper, Montana Free Press for P.R. and recruit volunteers.
4. develop Respite Home.
5. recruit and train volunteers.
6. contact referral sources.
7. develop community education pamphlets.
8. contract with local therapists.
9. see clients as they are referred.

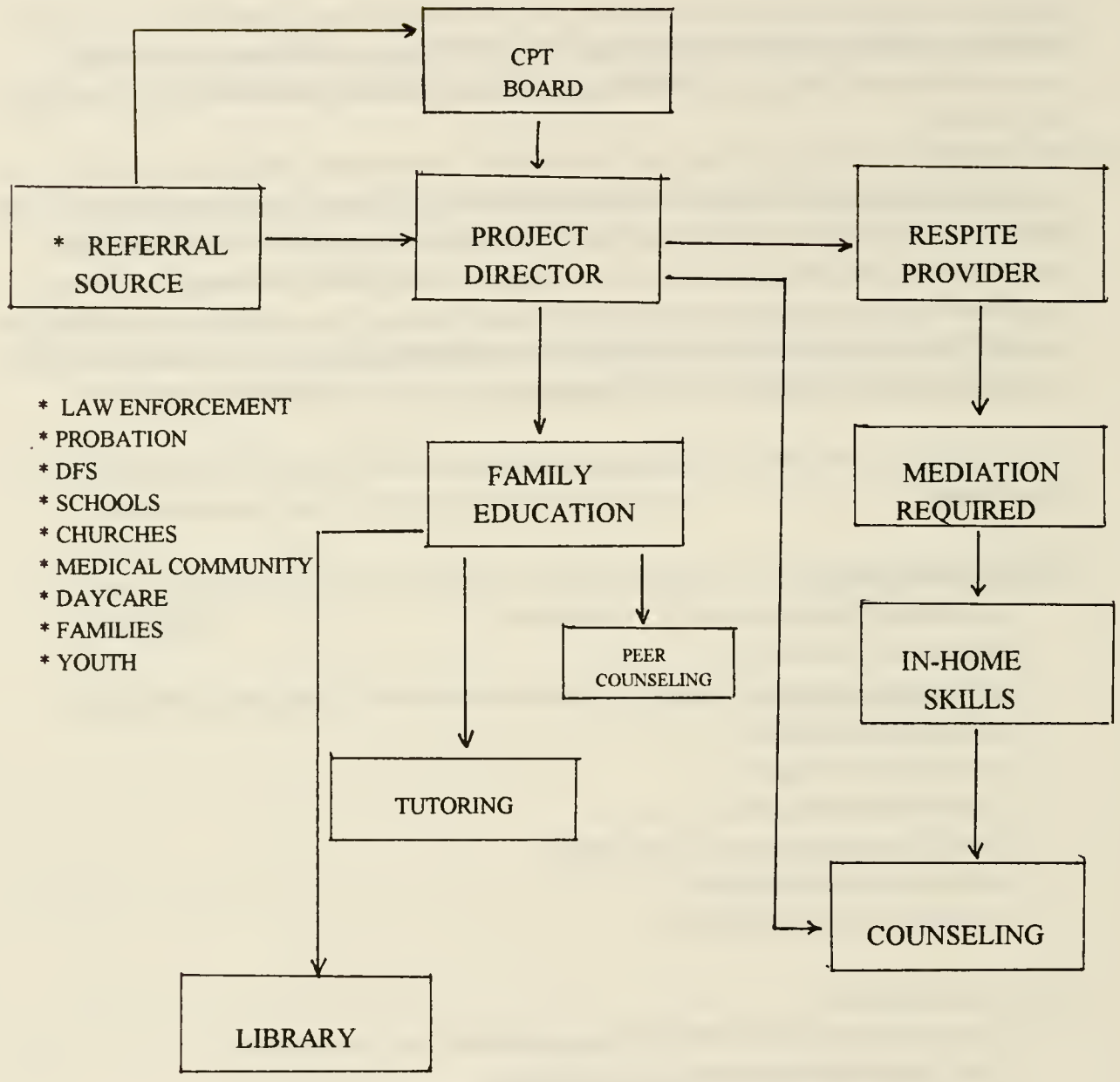
B. Four to six months:

1. continue public relations efforts through public talks and news articles.
2. SCPT and Project Director evaluates program.
3. implementation of ideas subsequent to program evaluation.
4. investigate funding sources.

C. Six to twelve months:

1. program evaluation and implementation of changes.
2. continued volunteer recruitment and training.
3. actively seek funding sources.

FLOW CHART


CPT BOARD
* REFERRAL SOURCE
PROJECT DIRECTOR
RESPITE PROVIDER
* LAW ENFORCEMENT
* PROBATION
* DFS
* SCHOOLS
* CHURCHES
* MEDICAL COMMUNITY
* DAYCARE
* FAMILIES
* YOUTH
FAMILY EDUCATION
MEDIATION REQUIRED
PEER COUNSELING
IN-HOME SKILLS
TUTORING
COUNSELING
LIBRARY

SECTION 4

PROGRAM EVALUATION/ASSESSMENT

Internal program evaluation will be accomplished through a computerized data base system. The data base will be comprised of basic client biographical data, including presenting problems/issues. (See attached referral and intake forms). Statistics regarding caseload, types of treatment and/or intervention will also be documented and tracked with the data base system. With this information, program personnel will be able to monitor client's progress and be able to document clients re-entering the program and for what reasons. This statistical information will provide a means to measure the success of program goals and objectives.

The statistical data will be provided to the Stillwater County Child Protection Team on a monthly basis in order to measure the attainment of program objectives. The Child Protection Team will also be in a position to review the caseload and add direction to the program. Designated members of the Stillwater Child Protection Team will also be in a position to assist with case management and consultation. The statistical data will be made available to the Family Preservation Council.

F. FUTURE FUNDING PLAN:

Stillwater County has mixed blessings. On one hand, there are a variety of job opportunities within this rural county; however, on the other hand, those same job opportunities provide Stillwater County with the majority of their problems. There are several large companies providing employment opportunities within this county. There is a large mining operation that attracts many people for jobs and provides many of those people with jobs. Additionally, there is the Montana Silversmith's that provides a large number of factory type jobs for many women in the county.

As stated earlier, the employment opportunities presents a mixed boon to the community. While there is high employment, the population of the county has become a transient population with large numbers of families moving into the area that have previously worked for other mines and related industry. As a result, these families bring some unique problems with them. There is a considerable lack of family support and stability within the family structure as these people move frequently. The lifestyle and working conditions are conducive to alcohol and drug problems and, as a result, problems with violence. The mining company does recognize the problem and has a Human Services Department that could be approached for possible funding on a contract basis in the future for continuation of the program.

The service clubs within the county are very aware of problems within our area and have shown a strong interest in supporting problem solving endeavors. For example, local service clubs provide fund raising support for the Special K Ranch, a ranch living experience for the developmentally disabled. Also, local schools and law enforcement have worked diligently with the DARE program and the Teen Institute programs to help address the alcohol and drug problems within the county schools. These areas could possibly be a supplemental source of funding for continuation of the program.

Our community seems to have an active group of citizens who are experienced with writing successful grants. For example, the Library Board was awarded a large grant to buy and refurbish a building for a new county library within the last few years. The hospital and related people have been awarded a grant to address the daycare problem within the county. A gift from a local business enabled the hospital to acquire a building for daycare and preschool purposes and a grant provided scholarships for children and infants for daycare services. The local school district has written many successful grants for computer systems, adult education, etc. The local Alternatives program for the court system is an example of related agencies pursuing grant

court system is an example of related agencies pursuing grant funds. It would appear that there is a large base of expertise that can be tapped into to pursue future funding sources through other appropriate grants. At the present time, several members of the Child Protection Team are researching supplemental grant and funding sources.

The primary goal of this grant is to fill a major gap in local services. The gap in services is not going to go away and, once this program begins to address the gap in services, the need for the continuation of the program is going to continue. As a result, the Child Protection Team members are committed to evaluating the program, continually updating the program to address the need and to pursuing permanent funding sources to facilitate the expansion and continuation of the program. The team members will be pursuing funding sources through the local businesses, local service clubs, local agencies and private, state and federal grant sources. As evidenced, the citizens of our county our concerned, responsive and experienced in pursuing funding for productive, service providing entities. It is expected that this program will be no exception to this county wide philosophy.

CLIENT INTAKE DATA

DATE:_____ PHONE:_____ SEX: M___ F____

NAME:_____ SOCIAL SECURITY # :_____

ADDRESS_____ CITY_____ ZIP_____

BIRTHDATE_____ SCHOOL/EMPLOYER_____

ARE YOU CURRENTLY IN COUNSELING? Y N IF YES, WHO ARE YOU SEEING?_____

THERAPIST'S ADDRESS_____ PHONE_____

ARE YOU OR YOUR FAMILY CURRENTLY ON MEDICAID? Y N

DO YOU FOR YOUR FAMILY MEMBERS HAVE HEALTH INSURANCE? Y N

IF YES, WHO IS YOUR INSURANCE CARRIER:_____

GROUP #_____ ID #_____

PLEASE DESCRIBE THE CIRCUMSTANCES THAT BROUGHT YOU HERE.

_____

_____

_____

_____

_____

_____

WHAT DO YOU WISH TO ACCOMPLISH BY COMING HERE?_____

_____

_____

_____

_____

_____

THE FAMILY TREE

P.O. BOX 68
COLUMBUS, MT 59019
(406) 322-5144

CLIENT DATA:

CLIENT NAME:_____ HOME PHONE:_____

ADDRESS:_____ CITY:_____ STATE:_____ ZIP:_____

SOCIAL SECURITY #_____ BIRTHDATE_____

SEX: M___ F___ RACE:_____

FAMILY INFORMATION

FATHER'S NAME:_____ MOTHER'S NAME:_____

ADDRESS:_____ ADDRESS:_____

PHONE:_____ PHONE:_____

REFERRAL SOURCE

NAME OF REFERRAL SOURCE:_____ CONTACT PERSON:_____

ADDRESS:_____ CITY:_____ STATE:_____ ZIP:_____

REASON FOR REFFERAL:_____

_____

_____

_____

FAMILY TREE
PROJECT DIRECTOR
POSITION DESCRIPTION

DUTIES AND RESPONSIBILITIES:

The successful applicant will provide contracted services for 20 hours per week for one year to families within Stillwater County that meet the criteria of the grant proposal for the Family Tree. The Project Director will:

Assess family functioning to determine what base of services will address the specific needs of the family.

Provide mediation services, crises intervention and short term counseling to referred families in crises.

Arrange for short term respite services for youth from 12 to 17 who are in a family crises situation.

Develop a training program for volunteers that will enable the volunteer to go into the home and teach basic communication skills, problem solving skills, etc to families in crises. Train volunteers in the program.

Develop a list of community resources to refer families to and provide the referral to these services.

Coordinate volunteers from existing programs such as MTI and TIP in the county schools to provide peer services to the project's families.

Coordinate and assign volunteers to go into the home to work with individual families.

Provide monthly reports to the Child Protection Team regarding the progress of the grant.

Be a resident of Stillwater County.

KNOWLEDGE, SKILLS AND ABILITIES:

This position requires a professional level of counseling, mediation and teaching skills. It requires a knowledge of programs that are available for training implementation that develop skills of communication, problem solving techniques, etc. that will empower and strengthen the family system and create family stability. Additionally, a knowledge of local community resources and the ability to determine the gaps in the local resources is necessary. The position also requires the ability to develop volunteers, train volunteers and organize volunteers. It requires a working knowledge of family dynamics, alcohol and drug issues, parenting issues, domestic violence and anger management situations. It requires the ability to communicate successfully with teen 12 to 17 years old, parents, community

volunteers, and professionals providing services within the community. This position also requires the ability to work with grants and provide reports to agencies overseeing the grant. The position requires the individual to work under trying situations which involve crises with families and youth.

EDUCATION AND EXPERIENCE:

The position requires a certification as a Chemical Dependency Counselor, and at least 3 years experience working with families in areas of domestic violence, anger management and substance abuse. It also requires experience teaching parenting classes or related workshops, coordinating and supervising personnel and writing and working with grants.

SECTION 5 - SUBGRANT CERTIFICATION PAGE

The officials who certify this document agree to adhere to all terms and conditions relating to this application. Duplication of responsibilities by one individual for the positions listed below is not acceptable. ONLY ORIGINAL SIGNATURES ARE ACCEPTABLE. Please see Guidelines regarding signatures.

A. OFFICIAL BUDGET REPRESENTATIVE (City/County Commissioner, Mayor, Dept. Hd)

TYPE/PRINT NAME [illegible] TITLE [illegible]

ADDRESS Box 970 CITY Columbus, MT

ZIP CODE 59019 PHONE 406 322-4374

DATE April 24 SIGNATURE [illegible]

B. PROJECT DIRECTOR

TYPE/PRINT NAME Lanny Stene TITLE Sp. Ed. Coop Dir.

ADDRESS P.O. Box 899 CITY Columbus

ZIP CODE 59019 PHONE 322-5373

DATE April 24, 1995 SIGNATURE Lanny Stene

C. FINANCIAL OFFICER

TYPE/PRINT NAME Carol Rice TITLE County Treasurer, Stillwater Co.

ADDRESS Stillwater Co. Courthouse CITY Columbus

ZIP CODE 59019 PHONE 322-5320

DATE April24, 1995 SIGNATURE Carol J. Rice

D. CLERK/CLERK & RECORDER
(Cities & Counties Only)

TYPE/PRINT NAME Janet Parkins TITLE Clerk and Recorder, Stillwater Co.

ADDRESS Stillwater Co. Courthouse CITY Columbus

ZIP CODE 59019 PHONE 322-4546

DATE April 24, 1995 SIGNATURE Janet R. Parkins

HOME OF THE PIRATES

REED POINT PUBLIC SCHOOLS

P.O. Box 338 • Reed Point, Montana 59069
High School 406-326-2245 • Elementary 406-326-2228
• Fax 326-2339 •

April 20, 1995

Child Protection Services
Stillwater County Courthouse
Columbus, MT 59019

To Whom It May Concern:

I am writing to offer my support for the endeavor to gain a grant for Family Services in Stillwater and Sweet Grass Counties. The families of our county would benefit from a program that would help them learn appropriate skills and interventions. This effort would in turn help the students of my schools to be better equipped to learn the necessary information in their respective classrooms.

There are certainly many families in need of the types of interventions described to me by Department of Family Services personnel as components of this grant proposal. I go on record in support of this grant application.

Sincerely,

Jerry Jennex, Superintendent

MONTANA STATE UNIVERSITY
EXTENSION SERVICE

Stillwater County Extension Office

400 Third Avenue North (Courthouse)
P.O. Box 807
Columbus, MT 59019

Telephone (406) 322-5334
Fax (406) 322-4698

April 11, 1995

To Whom It May Concern:

This letter is being sent in support of the Rural Family Preservation Grant requested by Stillwater County, Montana.

Two provisions are especially meaningful to me. It has been my experience as an Extension agent teaching parenting classes that it is difficult to get parents who need to develop parenting skills to attend classes. Through this grant proposal, classes will be taken directly to such parents, thus filling a void which currently exists in Stillwater County.

Another provision of this grant is that young people who are not normally involved in youth organizations such as 4-H (with which I work) will be extended the opportunity to develop social and communication skills which will hopefully result in a feeling of self-worth and thus the development of leadership skills. I have every confidence from working with young people over 20 years that youth knowing others care is the key to a productive life.

I believe that both adults and youth have potential they may not be aware of until the opportunity is unleashed by those who care. This grant makes this opportunity possible in Stillwater County. Therefore, I would encourage the selection committee to make the Rural Family Preservation Grant in Stillwater County, Montana, a priority.

Thank you.

Sincerely,

Karen Tyra

Karen Tyra
Stillwater Extension Agent

Montana State University, U.S. Department of Agriculture and Montana Counties Cooperating • MSU is an equal opportunity/affirmative action institution.

RESIDENCE
328-4496

HOSPITAL
322-5316

ABSAROKEE MEDICAL CLINIC
JACK L. EXLEY, M.D.
BOX 425
ABSAROKEE, MONTANA 59001
—
TELEPHONE 328-4497

April 18, 1995

Family Preservation Committee
c/o Judy Murray, Juvenile Probation Officer
13th Judicial District
Stillwater County Youth Court Services
P. O. Box 599
Columbus, MT 59019

Dear Mrs. Murray:

I am very pleased to learn of the application for the federal grant for the family preservation in Stillwater County. This proposal is indeed an outstanding one and the plan to provide early intervention to families at high risk and focus toward impowering these families in creating a greater family stability is vitally needed. I see a significant need for the priority group that you have identified including children in poverty with unstable housing, mental health patients in the family, family members involved in substance abuse, social isolation or violence. To provide resources and a more positive outcome from these high risk children and families is a vitally important goal.

I commend your agency for pursuing the grant to implement this proposal and lend my voice to those expressing strong support for its implementation.

If I may be of any further assistance in this matter, please feel free to contact me.

Sincerely,

Jack L. Exley, M.D.

JLE/jw

OFFICE OF THE COUNTY ATTORNEY
STILLWATER COUNTY, MONTANA

38 North 4th Street
P.O. Box 179
Columbus, Montana 59019
(406)322-4333

Blair Jones
County Attorney

Robert Eddleman
Deputy

April 18, 1995

To Whom It May Concern:

This letter is in support of the Stillwater County Family Preservation Grant Proposal. As County Attorney, I am in a unique position to assess the sources of juvenile and adult crime occurring in Stillwater County. In a substantial number of cases, breakdown or dysfunction in the family is a principle contributing factor in criminal conduct.

The Stillwater County Family Preservation Grant Proposal seeks to provide early intervention for families at risk of becoming involved in the "system". With the availability of early intervention, prevention of criminal conduct is enhanced resulting in savings to the community in terms of actual expense, personnel hours, and a reduction in victim trauma.

I support the grant proposal and respectfully request approval of the grant for this most worthwhile project.

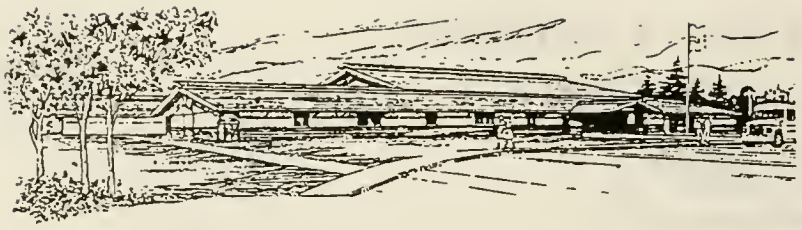
Very truly yours,

STILLWATER COUNTY ATTORNEY

Blair Jones

Blair Jones

BJ/sf



Absarokee Public Schools

School District No. 52 & 52C
RR1 • Box 2020 Absarokee, Montana 59001– 9701 Phone (406) 328 - 4583
FAX (406) 328 - 4077

G. Michael Reynolds
Superintendent

Fred Chouinard
Elementary Principal
EL # (406) 328-4581

Sara S. Kerr
School Clerk

Absarokee Public Schools supports our local Department of Family Services office application for the attached grant. The intent of the grant is to get services to families at critical times as a preventative measure. It may well make it possible for families to help themselves and not enter the system. Department of Family Services officials thinking is sound, the plan is good, and the need is real.

Speaking just on behalf of the community of Absarokee, I have observed the following:

- over 5% of our junior high/high school students are currently not living with either parent

- our substance abuse type violations are at an all time high

- disciplinary referrals have escalated

- criminal mischief complaints are up

- the number of parents who come to school voicing frustration over their child's behavior is growing every year

- our end of the county has a relatively new mining development that currently employs 450 people. This number will grow to 600 in two years

- as with any heavy industry, there is constant movement of families. Many times these families do not stay put long enough to stabilize

- when we opened our door this Fall, we had 28 new students in junior high and high school. Of these 28 only six would I consider "normal" (i.e. parents, family, educational development, etc.). Eight were sent here to be "fixed" by living with a non-parent family member or friend

I feel very strongly that the need for this grant in Stillwater County is great. Please give it full consideration.

Sincerely,

G. Michael Reynolds
Superintendent

"The Huskies"

Thirteenth Judicial District
Stillwater County Youth Court Services

Phone 406 - 322 - 5997 • P.O. Box 599 • Columbus, Montana 59019

February 27, 1995

To Selection Committee:

It is exciting to think that our county could receive grant money for DFS's family preservation program. After much communication over what our community's needs are and what we could be doing to meet those needs, it seems that we have set some goals that are reachable.

So often I have sought out 4-H club leaders, Sunday school teachers, school teachers, etc. to help provide an evironment for kids to work as assistants or aide. How great it would be to have an established system where a variety of people, both with and without skills, can be matched because the whole community resources are working together.

I have been using different tutors for kids in almost every school in our county. Many are hired by the school, some by myself, and some by the family. Some work well, others do not. Some times I have no idea what my bill is going to be. How great it would be to have tutors trained in communications and mentoring and to know more of what the interaction is likely to produce than I do now.

Often, it has happened that the Youth Services Center is overcrowded when we have a need for acute crisis care. How needed is a program that is in effect for that potential as well as some mediation to get that family working on getting back together.

I'm having a good time dreaming of my use of the program we want to develop. Thank you for offering our community the opportunity to try to get it.

Sincerely,

Judy Murray

Judy Murray, Juvenile Probation Officer

ALTERNATIVES, INC.

ALPHA HOUSE
104 No. 31st
Billings, MT 59101
Phone: 248-5851

BETA ALTERNATIVES
3109 1st Avenue No.
Billings, MT 59101
Phone: 259-9695

CARBON ALTERNATIVES
P.O. Box 1652
Red Lodge, MT 59068
Phone: 446-1675

STILLWATER ALTERNATIVES
P. O. Box 1050
Columbus, MT 59019
Phone: 322-4121

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Criminal Justice Consultant

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Sheriff, Stillwater Co.

ROSEMARY BOSCHERT, 2nd V. P.
Attorney

ELINA SHIRAH, SECRETARY
ERA Home & Ranch

SUSAN RIPLETT, Treasurer
Vice Pres. F.I.B. of Billings

BETH BINSTOCK
U. S. Attorneys Office

BRENT BROOKS
Deputy County Attorney

JOHN BROSS
Professor Emeritus, RMC

PAUL CIMMINO
Professor, EMC

SCOTT CRICHTON
Director, ACLU/MT

MARION DOZIER
Community Representative

ELLEN FELDMAN
Job Service

ROWENA FOOS
Education Consultant

RANDY GOWEN
Adult Probation & Parole

EDITH GRONHOVD
Retired Librarian

DAVID L. HENRY
CPA

CONNIE KULBECK
Deaconess Medical Ctr.

AL McGILL
Sheriff, Carbon Co.

JOHN MICHUNOVICH
Retired St. Hwy. Appraiser,
City Council Member

CLIFF MURPHY
Professor Emeritus, RMC

CHARLES P. MYERS
Attorney

BENJAMIN PEASE, JR.
Retired Educator

JOHN PRINKKI
Carbon Co. Commissioner

JERED SCHERER
Smith's Funeral Home

CHARLES F. TOOLEY
Communications Consultant

TOM TOWE
Attorney, State Senator

JOHN "KELLY" ADDY
Legal Counsel

DAVID O. ARMSTRONG
Administrator

BETTY ANN ROAN
Deputy Administrator

February 27, 1995

To the Selection Committee:

I was very pleased to hear that the Family Preservation Funds were being made available to rural counties. In working with the local courts on rehabilitative measures for offenders, it is very clear that Stillwater County continues to experience tremendous population growth, with very few services being offered.

It has been my experience, in working with court referrals, that the majority of offenders, and their families, possess very few basic coping tools in order to effectively deal with life. Unfortunately the most used coping tools are drugs and alcohol. Many times I have heard offenders state that they wished they could have learned effective coping tools prior to their arrest. The personal stories of the offenders and their families is often times heartbreaking, especially in the area of domestic violence. In the four and one half year history of my Anger Management program, there have been four cases in which alcohol and/or drugs did not play a major role in family violence.

I am enthused about the possibility of our county providing essential services to those families who are unable to afford services and therefore "fall between the cracks" until there is a crisis and enforcement agencies become involved.

Thank you for your consideration.

Sincerely,

Clint Stocks

Clint Stocks, CCDC
Stillwater Alternatives Manager

Columbus Public Schools

*Duane A. Denny, Superintendent *George McKay, Principal
224 West 4th Avenue North P. O. Box 899
Columbus, Montana 59019
Phone: (406) 322-5373 Fax: (406) 322-5376

February 22, 1995

To Whom It May Concern:

I am writing out of concern for the resources our community lacks in dealing with family related problems. I belong to a local Child Protective Team which meets monthly to discuss minor individuals in the community which may need, or are eligible for, services provided by various agencies, i.e. Family Services, Mental Health, etc.

During these discussions we frequently are confronted with situations which cannot be addressed properly due to a lack of funds, services or access to proper channels. Many of these situations are family based. As a school principal I am regularly involved in many incidences which are rooted in family affairs yet are expressed during school hours. When these situations are referred to the local agencies they do what they can but often times fall short of the most effective means of addressing the problem. Our group became quickly interested in the availability of funds for rural communities. It is our hope to fill in some of the gaps we face in dealing with these family related issues.

Some the family related issues we are currently faced with are single-parent families, poor supervision of young children at home, emancipated (formally or informally) teens, parent-child difficulties, teen crime and peer pressure, hygiene deficiencies and many more. It is our hope that we could establish more effective local resources in dealing with these problems.

Please take into consideration our proposal when the grant monies are distributed.

Sincerely,

George McKay

George McKay, Principal
Columbus High School

STILLWATER/SWEET GRASS COOPERATIVE
COLUMBUS H.S. BOX 899 PHONE 322-5373 FAX 322-5376
COLUMBUS, MT 59019

The Stillwater/Sweet Grass Special Education Cooperative and the Columbus Public Schools are in support of the Department of Family Services and Child Protection Teams grant application. Being a rural county we have not had the fincancial resources for support services that are needed. Currently our schools have been dealing with family issues that need much more support than we are currently able to provide. This grant would allow us to pursue the needed professional support services to identified families and students.

Stillwater County is growing at a very rapid pace. The Stillwater Mining Company is looking to double production, which also means they will double their work force. Currently we lack the manpower and the professional intervention services needed to deal with families and students at risk at the present time. As our county continues to experience growth the services we currently have will be diluted even more.

We support the Department of Family Services in recognizing the growing needs of schools and families in Stillwater County. The grant will be put to good use. We have excellent access to additional services being located 40 miles west of Billings. Please consider our needs and growth when viewing our application.

Sincerely,

Lanny Stene

George McKay

Lanny Stene, Director
George McKay, H.S. Principal
Columbus

REGION IV ADVISORY COUNCIL'S FAMILY SERVICE PLAN

Prepared for 1995
by Kathleen D. Ostrander
Regional Administrator
Department of Family Services
316 N. Park
Helena, MT

February 15, 1995

INTRODUCTION

The Department of Family Services is mandated to provide protective services to children and adults. Recently, the Department has been going through a transition from an agency that is isolated and works independently to protect children and adults to an agency that looks to the community to provide support and direction in the best practice methods of protecting children and adults. The Departments's mission statement, "To protect children and adults by supporting family and community strengths." reflects this attitude. The Department of Family Service IV-B plan reflects the Department's vision for a system that is in keeping with its mission statement.

1. Strengthening of prevention and family support services such as day care, family based services and early intervention.
2 Renewed and deepened commitment to permanency planning. This is defined as planning to assure that all DFS clients have lifetime family connection.
3. An understanding of the need for a full and integrated continuum of services from prevention through intensive out of home treatment.

Statewide, the Department has endeavored to enhance resources for:

- family preservation and family centered services
- family support and family strengthening services
- integrating child day care services and domestic violence services more fully into DFS service plans
- prevention of domestic family violence
- permanency planning for lifetime connections for DFS clients
- making permanency planning and family support planning an essential component of protective services from the very first point of contact
- systematically understanding and addressing not just the symptom, but also the reasons our society and communities are experiencing a growing crisis in violence and dysfunction manifested in abuse and neglect of children and adults

The Department has made courageous efforts to involve professionals from other agencies and community members. This has led the Department to embark on several initiatives in collaboration statewide.

ABOUT REGION IV

Region IV (the SW Region) consists of twelve counties; Beaverhead, Broadwater, Deerlodge, Jefferson, Gallatin, Granite, Lewis and Clark, Madison, Meagher, Park, Powell, and Silverbow.

According to the 1990 census there are forty eight thousand four hundred nine(48,409) youth under the age of eighteen that reside in these twelve counties. Of those children, eight thousand seven hundred three (8,703) or 18% live at 100% of poverty.

There were one thousand eight hundred ninety nine (1,899) children reported to have been abused and neglected in fiscal year 1994. There are two hundred seventy seven (277) children currently in out of home placements. There are thirty one and one half (31.5) social work positions in the region providing protective services to children and adults and five and one fourth (5.25) family resource specialists in the region to deal with the needs of the children and families we serve. A specific breakdown by county is included in appendices "a" and "b" of this document.

The Region IV Local Family Services Advisory Council currently has a total membership of eight representatives. The areas of expertise that are represented are foster care, public health, early childhood, education, corrections, social work practice, cultural competency and the legislature. Statutorily, thirteen members are allowed. Recruitment efforts are underway to recruit representatives from youth court probation. A current list of Advisory Council members is attached. (appendix c)

Mission: The Region IV Local Family Services Advisory Council's mission is : To support the Department of Family Services' mission in the Southwest Region by advising DFS staff is establishing priorities and implementing and reviewing services based on the needs of local communities.

During 1994 members of the Region IV Local Family Services Advisory Council have been informed and or involved in many planning processes in a collaborative effort with other agencies. A brief synopsis of the initiatives and the results of the planning process follows.

I. FAMILIES FOR KIDS

The mission of the Families for Kids project is to support the strengths of agencies and communities to provide each child with a life long family.

During 1993 and 1994, FFK project staff worked in concert with DFS staff and other key stakeholders in an attempt to redefine the child welfare system as we know it. From this effort the following public policy objectives for Montana's permanency planning system were developed.

- to keep children with their birth families whenever possible
- if out of home placements must occur, to return the child to his/her family as soon as possible;
- if neither of the above two objectives are possible, to provide another permanent family for the child in a timely fashion, preferably through adoption; and
- provide life long family connections for all children who must grow up in out of home care

The following were defined as needed outcomes to implement a system that supports

permanency planning.

1. Family support strategy for system change
2. Timely intervention strategy for system change
3. One caseworker or case management team
4. A single coordinated assessment strategy for system change
5. Single foster care placement

Community meeting were held within the region to define strategies and barriers to implementation. Input was gathered from foster /adoptive families, parents, and professional who have a stake in the welfare of children. The following were offered as strategies and barriers to implementation of the outcomes.

1. Family support strategy for system change
   Strategy : Partnership Project and Managing Resources Montana
   Barrier: Insufficient funds to expand to birth, foster and adoptive families

2. Timely intervention strategy for system change
   Strategy : Training curriculum on family preservation and permanency planning
   Strategy : Develop department capacity to provide training to other agencies involved with foster care review, child protection teams, youth court placement committee, Managing Resources Montana, and Local Family Service Advisory Councils
   Barrier: No funds
   Strategy :Use time limited case plans which focus on family strengths and child's need for permanence with both the family and service provider.
   Barrier: Not being done due to training issues
   Strategy : Prepare children for permanent placement and families for adoption.
   Strategy : Place specific number of children from target population in permanent homes.
   first year: children in placement more than two year
   second year: children in placement eighteen months or more
   third year: children in placement over one year
   Barrier: insufficient manpower

3. One caseworker or case management team .
   Strategy : Implement alternatives to reduce number of workers and initiate use of teams
   Barrier: Lack of consensus on appropriate alternatives; insufficient staff to cover all case demands; insufficient funding

4. A single coordinated assessment strategy for system change
   Strategy : Each family will be assigned a case manager to be responsible for gathering, coordinating and summarizing assessment information at the front end
   Strategy : Clarify roles and functions of child protection teams, sex abuse teams. youth placement committees and MRM teams.

Barrier: Lack of clear roles for committees responsible for planning with children and families.
Strategy : Develop single coordinated assessment process.
Barrier: No established process
Strategy : Use interagency teams.
Barrier: Adds responsibility, requires more manpower.

5. Single foster care placement
Strategy : Provide basic and specialized training to department staff responsible for licensing and placement to foster and adoptive families.
Barrier: Lack of training money
Strategy : Increase post placement support services to foster and adoptive families.
Barrier: No funds to increase service or staff to implement services

The overall theme to the barriers for implementation were lack of training, lack of manpower and lack of funds for purchasing services. The Department has been approved for funding for the Kellogg Foundation grant. Regional and county staff will be working in concert with the implementation team to address the barriers.

II. MANAGING RESOURCES MONTANA

Managing Resources Montana was created by the Montana Legislature in 1993 to replace the Medicaid expenditures for inpatient hospitalization. It was created with the vision of interagency cooperation and collaboration to serve the needs of seriously emotionally disturbed youth. The Department of Family Services, Corrections and Humans Services, Social and Rehabilitation Services and Office of Public Instruction were key players at the state level. At the local level, Community Mental Health Centers, local DFS staff, local school districts, and providers and parents of emotionally disturbed youth met plan for a system that would provide services to youth in the least restrictive environment possible. A regional plan was developed based on community meetings in Helena, Bozeman, Butte, Anaconda, Livingston, and Dillon. The following is a synopsis of that plan.

PRIORITIZED SERVICE DEVELOPMENT NEEDS FOR REGION IV:

1. Expand family base services, i.e. respite parent support training
2. Expand therapeutic foster care
3. Expand community based crisis stabilization
4. Develop a range of resources from more restrictive to least restrictive for youth in transition
5. Expand day treatment K-12

PRIORITIZED SERVICE GAPS:

1. Secure, acute crisis stabilization

2. In home services
4. Therapeutic foster homes
3. School based day treatment
4. Sex offender services

III. CONTINUUM OF CARE: Hard to place youth

In the summer of 1994 two meetings were held to identify the service needs of a few youth who were currently in residential care and had been placed out of state. The first meeting involved professionals from MRM, DFS and youth court who held the responsibility for obtaining the least restrictive placement for youth who were assigned to them . The second meeting involved providers who provide residential services in the region.

A profile of twelve of the youth that were the most hard to serve were as follows:

- Most (nine or more) had more than five placements; these youth drift from facility to facility in and out of state, some due to numerous runs, some due to behavior problems, some due to funding problems, (Medicaid decertification)
- Most were on medications
- Few (three or less)were educationally challenged either reporting ED or LD labels reporting borderline IQ's
- Most had did not have a foster, adoptive or birth family as a realistic resource to the professionals involved
- Half had arson in their background
- Most were in the age range from 15-18 adolescents.
- Most had a history of being oppositional and defiant
- Half were labelled by their social workers or probation officers as sex offenders only two had been adjudicated
- Most were male

The outcome of these two meetings indicated that children and youth on this end of the continuum required a specific prescriptive approach to meeting their needs. Sex offender treatment for juveniles was noted for reactive offenders. A separate need for serving youth who are pedophiles was also documented.

IV. PARTNERSHIP TO STRENGTHEN FAMILIES

The 1993 legislature also designated funds to be set aside for child abuse/neglect prevention. This was named the Partnership to Strengthen Families Project, also know simply as the Partnership Project. Based on population, $240,000 was allocated to Region IV. $100,000 was set aside for the tri-county area of Powell, Granite and Deerlodge counties. Butte was provided a sixteen thousand dollar ($16,000) planning grant to determine the child abuse/neglect

prevention efforts that would benefit that community the most. The areas of Bozeman and Helena were asked to meet with professionals from multiple agencies, policy makers and families to decide how to spend the remaining allocated funds. All efforts had to be collaborative as funds would not be dispersed on a competitive basis. Bozeman developed a comprehensive proposal for a specific neighborhood with high risk factors. Helena is developing an elaborate research project to identify services in the community that are effective in keeping families together and prevent drift into the foster care system. Whatever funds remain in this area are to be designated to the very rural and isolated communities in Beaverhead, and Madison counties. Efforts are currently underway to identify potential service providers who can provide home visiting services to strengthen those families who have been referred to the department but for whom no services were provided.

V. FAMILY SUPPORT AND PRESERVATION:

The Family Preservation and Support (FP/FS) Act requires each state and eligible Indian tribe to develop a child and family services system that:

- keeps children and family members safe at all times;
- builds on the resources of families
- offers a continuum of services to children and families that is family focused, easily accessible and respectful of cultural and community characteristics;
- links the child and family continuum of services to other community, child, and family services and service delivery systems and the courts, to ensure that families have access to comprehensive services to meet their individual needs

Target population

The target population for Family Preservation and Family Support funds in Region IV are those children and families who have open active protective service case with the Department of Family Services. Services may be provided to family of origin, including extended families, foster families, and adoptive families.

Methodology in determining need

The Department of Family Services staff and the advisory council in Region IV have been actively involved with representatives from communities in planning for child abuse neglect prevention (Partnership Projects), Families for Kids, Managing Resources Montana and planning for services to accommodate hard to place youth. In addition, continual needs assessment is evolving from community child protection teams, youth court placement committees and interagency groups that meet to identify the needs of specific children. All of these planning documents were used in determining needs for the expenditure of FP/FS funds.

The planning efforts listed above are pieces of an integrated mechanism to support system change in protecting children. The overriding themes are:

- prevent and intervene in child abuse/neglect by supporting the family and community strengths;
- keep children with their family whenever possible, when that isn't possible, provide the

child with a life long family tie (Families for Kids) .

Family based services, respite , parent support and training were the prioritized service needs identified by parents, service providers, and key community leaders at the planning meeting for Managing Resources Montana whose goal is to provide the least restrictive mental health service for seriously emotionally disturbed children. Other input that was considered in the development of this plan was the Department of Family Services IV-B plan which speaks of embarking on a effort for system change by strengthening prevention and family support services.

Impacting the target population.

The Department of Family Services is first and foremost a protective service agency. Families who come into the child and adult protection system have emotional, social and often economic issues to overcome. Child protection social workers have been trained to investigate, gather evidence and bring it to court. Children are removed from families. Families and social worker become adversaries. In the last few years, social workers in the child protection arena have become aware of the effects of placing children out of their family environment. Further, the lack of staff and sheer numbers of referral has compelled the social worker to abandon some children at a low level of risk to focus on those children who are the most in danger. The foster care system is frequently used to protect children. The decision to place is made because of inadequate service options and resources to create and establish innovative yet safe practices for children. The decision to place is made because social workers are not adequately trained in innovative ways to work with families to protect children. The decision to place is made because it is the only decision that can be made to protect children. When placement occurs, permanency planning must begin.

How the money will be spent

The Family Preservation and Family Support funds allocated to Region IV (approximately $63,000) will be used for two purposes. First, to train agency staff and other professionals in models of practice that stress the involvement of the family in efforts to protect their children. A portion of the funds will be set aside each year for that purpose. Second, the funds will be used to purchase the services and basic needs of the family to implement a preservation and permanency plan. These needs will be identified by the family with input from professionals involved. The professionals involved will consist of the social worker, therapist, physician, nurses , law enforcement, and any other treatment specialists that may be involved with the family. The professionals and family would become the "preservation and permanency" team. Very specific preservation and permanency plans will be generated by the family and preservation and permanency team. The plans can include family group conferences and family unity meetings, both of which empower the family in decisions regarding their children in addition to specific services that are necessary to support the perservation and permancy plan. The plans will be flexible enough to allow for adjustments. Once the plan was established, the plan will become the application for family support and preservation funds. The funds would be accounted for by the region's Fiscal Officer and final approval would b e given by the Regional Administrator. These funds will only be approved when existing funds and programs could not provide the services identified by the family and preservation team. The funds could, however,

be used to compliment existing services.

Evaluation

Success would be determined by whether or not the outcomes predicted on the preservation and permanency plan are achieved. The evaluator assigned to the project from the State will assist in developing the preservation and permanency plan format that will allow for more objective and less subjective evaluation. It is intended that this system approach will build upon itself through the information gathered through evaluation. As it evolves, approaches to the plan and services that are required to fulfill the requirements of the plan will become apparent. Future funding will be used to expand the necessary services and use the practice method with more families.

FAMILY PRESERVATION AND SUPPORT FIVE-YEAR PLAN

REGION V

MONTANA

Region V consists of the western seven counties of Montana (i.e., Flathead, Lake, Lincoln, Mineral, Missoula, Ravalli, and Sanders). Although Region V is not the largest region geographically, population estimates suggest that nearly 28% (239,082) of the state's population (856,047) live within the western seven counties. Population growth has been particularly rapid in Region V in the past four to five years; in fact, 6 of the 11 fastest growing counties in the state are in Region V. Ravalli County's growth rate of 22.8% ranks first throughout the state. Furthermore, according to Dr. Patrick Edgar's forecast presented in Managing Resources Montana (MRM) "Three-Year Plan", the population in the region will continue to increase until the year 2000. For youth under the age of 18 the growth rate is estimated to be 1% to 3% per year until the year 2000.

Although this rapid expansion in population in and of itself taxes the infrastructures of communities throughout Region V, an exacerbating factor is the dramatic growth in the number of people below the poverty line. For example, the number of people in poverty in western Montana increased from 19,645 to 34,432 between 1970 and 1990. Children seem particularly affected by this trend, and in the 1980's Montana as a whole had the second highest rate of increase in the nation in the number of children living in poverty. Recent estimates for the state are that 16.5% of the overall population is in poverty but that 20.1% of people under age 18 are living in poverty. In comparison to the state average of 20.1%, 22.2% of people under age 18 in Region V are experiencing poverty. Dr. Paul Miller of the University of Montana predicts that the rate of growth for children below the poverty line will continue to exceed the rate of growth of people in general below the poverty line. Finally, if one looks at the number of families that are in poverty and that have children under age 18, Region V has approximately 28% of all such families in Montana.

Numerous factors contribute to the increase in the number of people living in poverty, but two significant ones are the changing employment picture and the rapid growth of single parent families. Although Montana has experienced economic growth, the largest increase has been in low paying jobs (e.g., service sector jobs); this combined with the loss of many industrial jobs (e.g., logging, mining) has had a negative impact on families' incomes (MRM Three-Year Plan). The number of single parent families (especially female-headed) in Region V has risen dramatically, and this also partially explains the increase in those living in poverty. From 1970 to 1990 the number of single parent families rose from 334 to 5209. One segment of the single parent population is the teen group. Although the teen pregnancy rate in Montana seems to be maintaining at 11% to 12%, the proportion of those married to single has declined by half. Teen mothers are less likely than their childless peers to finish high school and are three times more likely than their childless peers to remain a single parent family. These factors contribute to the ongoing cycle of poverty.

The increase in single parent families also appears to have placed greater demands on the system that provides financial assistance to those in need. Specifically, the number of recipients of "Aid to Families with Dependent Children" in Region V has doubled since 1978. This increase is not just due to the increasing population because the rate per 1000 has doubled also.

Are there observable effects of the increase in poverty among families in western Montana? Poverty and child death are known to be intertwined, and that may help explain why the infant mortality rate in Region V increased from 1978 to 1988. Furthermore, poverty has been identified as one of the highest risk factors for child abuse and neglect. Between 1985 and 1993 Montana experienced a 93% increase in the number of child abuse and neglect referrals, and in 1992 Montana was second in the nation for the rate of increase in the number of referrals for child abuse and neglect. Furthermore, Montana experienced a 50% increase in the number of children in out-of-home placements because of abuse and neglect between 1984 and 1993.

Low-income families also struggle to find affordable housing in western Montana. The Department of Housing and Urban Development defines "affordable housing" as that which takes 30% or less of a family's gross income. In Region V 18.2% of low-income families pay more than 30% of their gross income on housing, and 8.3% of low-income families pay more than 50% of their gross income on housing. Another indicator of the difficulties that low-income families are facing is the number of people without insurance. Approximately 22.5% of the people in western Montana are without health insurance.

Obviously, many families in western Montana are experiencing tremendous difficulties and stress in their daily lives because of factors such as poverty, single parenthood, low paying jobs, abuse and neglect, lack of affordable housing, and no health insurance. Montana's "Family Policy Act" was passed by the 1993 Legislature in order to allow the Department of Family Services (DFS) to begin working with distressed families in a more preventive rather than reactive mode. This change in approach is epitomized in DFS' "Partnership to Strengthen Families Project" which emphasizes early intervention services designed to shore up fragile families. The Region V "Family Services Advisory Council" (FSAC) awarded the initial funding through the Partnership Project to Lincoln, Missoula, and Flathead Counties, and the FSAC intends to continue to support these counties as additional Partnership funds are received.

Now, with the availability of funds through the Family Preservation and Support Act, the Region V FSAC decided to target the remaining four counties in western Montana (i.e., Ravalli, Mineral, Sanders, and Lake) for funding of appropriate services during the next five years. These dollars will make it possible to begin implementing prevention/early intervention services throughout Region V which is a goal held by DFS and the FSAC. This decision was made not only because it will help create more equal access to preservation and support services for all families in Region V, but also because in these four counties one finds the lowest median incomes in the region ($21,320 to $24,522 versus $25,084 to $30,359 in the

other three counties); the fastest growing county in the state (Ravalli); the county with the largest minority population (21% of Lake County's population is Native American); and two of the most rural and resource poor of all counties in western Montana (Mineral and Sanders). (Appendix A is attached to show the distribution of resources throughout Region V.)

Furthermore, a variety of other indicators suggest that many families in Ravalli, Mineral, Sanders, and Lake Counties experience very intensely the risk factors that lead to distress within the family. Consequently, families in these counties are desperately in need of supportive services. The following table displays some of these indicators.

	State-wide	Lake	Mineral	Ravalli	Sanders
1994 Unemployment rate	5.1%	7.2%	9.1%	6.1%	10.8%
1992 Teen pregnancy rate	11.9%	16.8%	15.9%	12.4%	18.8%
1991 Child poverty rate	20.1%	27.4%	25.9%	23.5%	23.9%

Since adolescent pregnancy is a strong indicator for families "at-risk", we will provide a more detailed look at data concerning this issue. As indicated previously, teen mothers are more likely than their childless peers to drop out of school, develop health problems, remain a single-parent family or have marriages that end in divorce, and live in poverty the rest of their lives. The "High-Risk Family Index" that was reported in the Montana "Kids Count Data Book" in 1994 is the percentage of all live births that are to women who have one or more risk factors at the time of birth (i.e., under age 20; <20 and not married; <20, not married, and <12 years of education). The following table compares the state-wide statistics with those for the counties targeted to receive funding under the Family Preservation and Support Act.

	State-wide	Lake	Mineral	Ravalli	Sanders
% of first births to women					
less than age 20	11.9%	38.3%	42.9%	24.5%	39.5%
-and not married	8.8%	34.6%	35.7%	17.3%	20.9%
-and <12years of school	7.1%	24.7%	21.4%	13.7%	14.0%

Two final indicators of the need for preservation and support services for families in these four counties are the abuse/neglect referral rates and the out-of-home placement rates. Lake, Mineral, Ravalli, and Sanders Counties combined have approximately 28% of the region's population of youths less than 18 years of age. Therefore, one could logically expect that those same four counties would have approximately 28% of all abuse/neglect referrals and out-of-home placements. However, in FY93 the four counties had over 29% of all abuse/neglect referrals to DFS in Region V, and in FY94 the four counties accounted for 32% of all unduplicated out-of-home placements of youths in Region V.

The FSAC took all the above factors into account when it made the decision to disburse any available funds through the Family Preservation and Support Act to Lake, Mineral, Ravalli, and Sanders Counties. Since families in all four counties are experiencing significant risk factors and the lack of supportive services, the FSAC informed the counties

about the potential availability of funds for service development; provided guidelines for service development; and asked for proposals to be submitted to them for consideration. After reviewing the proposals that were submitted by the counties, the FSAC decided to fund the proposals from Ravalli and Sanders Counties with the funds allocated for FY95. Both of these proposals were developed out of extensive community collaboration efforts (i.e., the Health Families' Coalition in Ravalli County and Parents United for Families in Sanders County). They both propose to create services that are identified as high needs by their respective communities. These proposals are attached to this introductory monograph, and they constitute Region V's plan for Year 1 for service development under the Family Preservation and Support Act.

If funds are available in future years, the FSAC will continue to support existing services as well as expand services to the remaining two counties. Region V's FSAC adheres strongly to the goal of having services equally accessible regardless of county of residence. Furthermore, the FSAC intends during the next five years to work toward the development of a fully integrated, comprehensive system that is responsive to children's and families' needs. In this effort the FSAC will endorse services that recognize and respect ethnic and cultural values and practices. Finally, services will be supported by the FSAC that treat parents and their children together and that emphasize in-home and community interventions.

The FSAC has identified a number of services that it believes are critical to families. These conclusions were reached by the FSAC after reviewing the proposals that were submitted; after considering the results of other community planning processes that have occurred (e.g., Partnership Project and MRM Three-Year Plan); and after discussing their assessments of the needs of children and families in their own communities. The following list is not prioritized, but it does include the service categories that the FSAC will endorse during the next five years. The FSAC will support the development of these services with whatever money is available.

FIVE-YEAR PLAN - PRIORITIES FOR SERVICE DEVELOPMENT

1. In-home services
    a. Home visitors
    b. Family-based services
    c. In-home therapy
    d. Parent training in child development, discipline, communication, etc.
2. Respite
    a. Emergency and/or planned
    b. In-home and/or center-based
    c. Family providers or trained providers
    d. 24 hour availability
3. Crisis response team that is available 24 hours a day to mediate conflicts, provide counseling on short-term basis, etc.
4. Phone lines available 24 hours a day to provide information and referral

5. Community/neighborhood "family centers" that offer:
    a. Supervision for children
    b. Counseling for children, parents, and families
    c. Parent education classes
    d. Job skills training
    e. Recreational activities for all family members
    f. Before- and after-school care
6. Increased numbers and funding for out-patient therapy
7. Additional community education opportunities for children, parents, professionals, etc.
8. Transportation systems to assist families in accessing services
9. Alternatives to public education
10. Expansion of out-of-home treatment services
    a. Shelter/crisis/treatment foster care beds
    b. Regional residential treatment center
    c. Acute care psychiatric beds in the region for young children
    d. Transition homes for youth returning from residential treatment centers or institutions

In summary, any funding that is available during the next five years through the Family Preservation and Support Act will be directed to Lake, Mineral, Ravalli, and Sanders Counties. These counties are relatively resource poor, and many families within these counties are experiencing unemployment, single parenthood, low paying jobs, no health insurance, poverty, child abuse and neglect, and out-of-home placements of their children. After considering the input from a number of community planning efforts, the Region V FSAC compiled the above list of services designed to meet the needs of families experiencing distress. The above list of services represents FSAC's best assessment of how we want to approach resource development during the next five years in Region V. We intend to remain flexible and take advantage of opportunities to develop other services (even if they are not included in the above list of priorities) as long as they fit into the framework of our goals and meet the guidelines established by the Family Preservation and Support Act. Certainly, our major focus will be directed toward implementing the services identified above.

SANDERS COUNTY

INFORMATION AND REFERRAL HELPLINE

This proposal was originally initiated after the Department of Family Services notified communities that monies may be available in the coming months to provide preventative and support services to families at risk.

This proposal was created by members of Professionals United For Families, hereinafter called PUFF. PUFF has a membership of agencies and individuals who are concerned with the quality of life available to families and children living in Sanders County. The mission of PUFF is to facilitate and enhance healthy family functioning through the provision of services and eliminating duplication of services. PUFF was granted 501-C-3 status by the Internal Revenue Service on December 6, 1994. As such, PUFF may receive and disburse monies granted under this proposal.

PUFF collaborated with agencies, individuals, and families at risk to identify gaps in services and then prioritized what areas to tackle first.

For this proposal, three areas were identified as needing expansion or development. The Sanders County Family Violence Intervention Project was identified as needing expansion if it is to remain a viable program. For development, it was identified that parenting classes needed to be reinstated in all townships on a regular basis. Also identified was the development of an Information and Referral Line.

On May 11, 1995, our original proposal was presented to the funding source. As a result of this meeting, PUFF was granted $10,850.00. It was stipulated that this money could be used for either reinstating parenting classes or for development and implementation of an Information and Referral Line.

At a regularly scheduled PUFF meeting, it was decided that we accept this money and that it be used to develop and implement an Information and Referral Line. Creating an Information and Referral Line will be a first line of defense or offense for families. It will serve the purpose of linking individuals, agencies, and families to local resources and services. It will also provide information regarding services available in neighboring communities and

counties. We believe that this service is necessary as Sanders County has no public transportation and travel for many families is a hardship.

Under this proposal it will be necessary to hire a part-time coordinator. The coordinator will be responsible for developing the Information and Referral Line. The coordinator will recruit, train, and supervise volunteers to operate the I & R Line. The coordinator with a staff of volunteers will research, compile, and disseminate information to interested parties. The coordinator and volunteers will also be responsible for development of an advertising campaign that will inform the general public of this new service. The coordinator will be responsible for developing an evaluation format to assess the effectiveness of the program. When there is a gap between services offered and accessibility, the coordinator will work with service providers to find more effective ways of delivery. Statistics will be maintained on number of calls receive and the type of information requested. When possible, the coordinator will do follow up with callers to assess their satisfaction. The information gathered will assist PUFF in determining areas of need. The phone line will be installed in the office the Sanders County Family Violence Program.

BUDGET:

Administration	$ 285.00
Telephone	$ 3,000.00
Mileage	$ 170.00
Coordinator/taxes	$ 4,895.00
Advertising	$ 800.00
Printing	$ 1,200.00
Consumable Supplies	$ 500.00
Proposal Budget	$10,850.00
In-Kind Match	$ 2, .00
Total Budget	$13, .00

RAVALLI COUNTY FAMILY PRESERVATION AND SUPPORT SERVICES PROJECT

Community Profile and Needs Statement

Ravalli county is a rural, Southwestern Montana county located in the Bitterroot Valley. Its 27,477 residents live in 1,408 square miles. Only 10.9% of Ravalli County residents live within urban limits. In the past few years the county has seen increasing numbers of people locating here. The 1994 figures from the Census Bureau showed Ravalli County had the largest population gain in the state, 22.8% from 1990-1994. Enrollment among Ravalli County Schools has risen on the average of 6 % per annum for the past three years. The county has a number of problems that result from suburban development without an adequate economic base. The valley has been experiencing escalating incidences of damaging behavior patterns in schools, families and communities. Increased problems such as teen pregnancy, drug and alcohol abuse, functional illiteracy, minimal parenting skills, conduct and emotional disturbances in school settings, physical, sexual and psychological abuse of children and adults, repeated failure in school, and community delinquent acts are all increasing the pressures on the families, schools, and communities.

The Bitterroot Valley continues to have a socioeconomic base lower that that of many Montana counties. The Job Service reported the unemployment rate for February 1995 in Ravalli County was 8.5%, the State of Montana rate was 6.9%. Statistics reveal that Ravalli County currently ranks in the top 20th percentile of all Montana counties for the number of children under six years of age who live in poverty. Sixteen percent of the overall population live in poverty. In families with a single female head of household, the poverty level escalates to 80.3% (1990 U.S. Census Report). Approximately 630 (29.7%) of children under 6 live in poverty. Ravalli County Public Schools report the percentages of students who qualify for either free or reduced lunches at the valley schools are as follow: Hamilton 31%, Corvallis 40%, Darby 45%, Victor 42%, Stevensville 27%, Florence 19%, Lone Rock Elementary 55%.

There is a strong relationship between poverty and limited literacy skills. The National Association for Educational Progress reports that when parents are functionally illiterate, their children are six times as likely as their peers to also be functionally illiterate. The National Adult Literacy Survey published by the U.S. Department of Education in 1993 reveals that one-quarter to one-half of adults in the United States lack functional literacy skills. Literacy training for parents is essential to empower them to break the intergenerational cycle of illiteracy.

Research (Strauss, et. al.) strongly suggests family violence is also intergenerational, that children learn the behaviors their parents are modeling. Studies reveal that children from violent homes have short attention spans, are hyper-vigilant, cannot develop long-term projects, externalize responsibility, have difficulty with either over-emotional responses or are numb to consequences of their behavior. As a result these children frequently turn to delinquency, drugs and alcohol to cope with extraordinary stresses. Teen violence, date rape and emotional abuse is steadily increasing (Montana Board of Crime Control, 1992-1993).

Over 5000 children in the Valley's public and private schools receive little if any direct education about family and relationship violence and conflict resolution. However, they receive numerous messages through the media and from many of their peers that power and control are achieved

through verbal, emotional and physical abuse. Recognizing abuse and confronting it with knowledge and awareness are two critical skills which are currently inadequately addressed in the classroom curriculum. Young women who were physically abused are more likely to report that their own children had been abused. Those who have been sexually abused are at an increased risk for adolescent pregnancy. (Boyer and Fine, 1992)

While indicators for families "at risk" vary, one strong determinant is adolescent pregnancy. Teen mothers are much more likely than other young women to drop out of school, develop health problems, have marriages end in divorce, and live in poverty the rest of their lives. There is an increasing number of pregnant teens. The "Montana Kids Count Data Book 1994" reports that in 1992, 12.4% of births in Ravalli County were to teenagers (compared to 9.9% in 1990). This is higher that the state rate, which has remained at 11.6-11.9%. The 1992 High Risk Family Index below shows the percentage women under age 20 who have one or more risk factors at the time of birth.

	Ravalli	Montana
Women under age 20, and unmarried;	17.3%	8.8%
Women under 20, and less than 12 years of schooling	13.7%	7.1%

Three local agencies offer home visitation services to pregnant women and families with young children; Access Links Pregnancy Program (a MIAMI project) (serving 138 new clients in the past year, 75% of these clients were at-risk), Public Health Department, and Department of Family Services. All of these agencies have staff limitations and cite inadequate home visitation services to families with children birth through age three. Preschool and Head Start provide services in our community for children aged three or older. There is a gap in service delivery for children birth through age three because of staffing and funding limitations.

To begin to identify the gaps in services available for families, focus groups were conducted throughout Ravalli County by the *Early Childhood Collaboration Project*, a Kellogg Foundation grantee. A summary of those focus groups is attached. Quality child care was identified as one of the "top ten" needs in Ravalli County. Identified were also infant and after-school care as prioritized needs. Parents seeking various community services were often limited in accessing them, because they lack finances for child care.

Ravalli County has an estimated population of 4918 children between the ages of birth and eleven. Thirty-seven licensed or registered day care facilities care for 426 children. Over one-half (245) of the available space is located in Hamilton. There are also thirty-eight legally unregistered day care providers serving approximately seventy-six children. All of these facilities operate only on weekdays and usually between the hours of 7:00 am and 6:00 pm. There is clearly a gap in child care providers outside the Hamilton area, and in evening and weekend services.

Collaborating Agencies

The Healthy Families of Ravalli County Coalition has been in place for four years working with many of the presented issues. This successful coalition addresses comprehensive plans for working with the high risk families whom agencies share as clients. The Coalition received a Kellogg Foundation Grant to pursue an Early Childhood Collaboration Project. After two years of collaborative efforts, additional stakeholders that provide services to Ravalli County families

joined. All stakeholders have been challenged to learn how to expand collaboration, address turf issues, and to consider the meaning of "family driven" services. This grant proposal; *Ravalli County Family Preservation and Support Services Project* is a logical outgrowth of the expanding collaboration efforts.

Stakeholders from the following organization have developed this grant proposal: Department of Family Services, the Ravalli County Schools, Child Care Resources, Early Childhood Collaboration Project, Literacy Volunteers of America-Bitterroot, SAFE, Family Involvement and Outreach Program, Marcus Daly Hospital, Public Health Department, Head Start, Bitterroot Valley Education Cooperative, and Riverfront Counseling Center. The County Commissioner, Mr. Jerry Allen, has agreed to be the contact person for this project proposal. Ravalli County Commissioner's office has also agreed to receive and disperse the funds.

Critical Services to Enhance and Link Together

The proposal, if funded, will provide a means to enhance and link a continuum of critical services in support of Ravalli County families. The driving mechanism to ensure coordination and linkage of these services is the formation of a county wide steering committee. This committee will have a representative from each of the programs in this project. To ensure the meaning of "family driven" services the steering committee will also have a representative parent from each of the programs identified as critical services below:

FOLLOW ME, a standardized home visitation program that has been piloted in ten Montana counties, is based on early risk identification and home based support for families with infants and young children. Post-partum home visitation offers documented advantages in assessment, identification, education and support of families "at risk". State funding to expand *FOLLOW ME* to twenty counties, including Ravalli County, was not approved by the legislature. There is a gap in service delivery for children birth through age three because of staffing and funding limitations. This gap could be filled by implementing the *FOLLOW ME* program in the county.

Home Visitation Training for Ravalli County professionals is essential. Training will upgrade existing skills and provide current information in post-partum and early childhood assessment for in-home service providers. A strong post-partum referral system exists between Marcus Daly Hospital and the Ravalli County Public Health Department. Continued collaboration between agencies and increased home visitation and assessment training can strengthen existing services.

Supporters of Abuse Free Environment (SAFE), has provided service to victims of abuse for eight years in Ravalli County. This year, crisis contacts have more than doubled in the first two quarters. In six months SAFE has provided information or services to nearly twice as many children (157) who have either witnessed or experienced family violence.

The family violence prevention movement in the United States has depended heavily upon education, support and judicial intervention. Until recently schools have been reluctant to admit information about spouse and child abuse; but within the past five years the doors are opening to a flood of information to help children identify abusive patterns in themselves and others, and discover new ways of meeting their own needs. The Domestic Violence Assistance Center (DVAC) in Missoula, the Jeannette Rankin Peace Center, and the National Coalition Against

Domestic Violence (NCADV) have curricula for children from elementary to high school ages to appropriately work with these issues.

SAFE's Family Violence Education Program will attempt to reach school age children in Ravalli County with videos, information talks, workbook exercises and informal gatherings to address this need for information. We will also offer training to school personnel on familial and relationship violence to assist staff in using these concepts on a regular basis in the classroom. When appropriate the SAFE educator will provide resources and training to school personnel, children, and families who are linked to the *Youth, Family, & School Enhancement Program.* This effort will be on a part-time basis initially, but with the assessments and evaluations gathered from this next year's project, SAFE will be able to apply for extended funding for more in-depth presentations in the future.

Literacy Volunteers of America-Bitterroot is a private non-profit organization which provides free, confidential, one-on-one tutoring to adults in Ravalli County who seek to improve their reading, writing, math, or conversational English skills. Located in the Bitterroot Public Library, LVA-Bitterroot utilizes volunteers to accomplish that mission throughout the county. In our *Family of Readers* workshops, parents of pre-school children are taught the importance of reading to their children regularly. Free children's books are provided to the families to help break the intergenerational cycle of reading problems. In the past year, LVA-Bitterroot provided direct tutoring to sixty adult students and workshops to an additional 27 parents of pre-school children. LVA-Bitterroot is committed to strengthening families by helping parents help their children.

The ***Family Involvement and Outreach Program*** began as an extension of the *Primary School Parent Advisory Council.* The Council, a parent driven organization, has identified the need to orient new parents (at registration time) to the school and the available community resources. There are also parents whose children are already enrolled who are unfamiliar with school activities and resources available to them. The *Family Involvement and Outreach Program* has a small model site at Corvallis Primary School. Research strongly supports the hypothesis that student success in school increases when parents are involved in the education process. The goal is to continue to develop the model program at two additional sites in Ravalli County.

Love and Logic curriculum promotes effective listening skills, natural consequences, and teaching children problem-solving skills and responsibility. There is a community-wide effort underway to promote a *Love and Logic Workshop*, presented by Jim Fay of the Cline-Fay Institute, in the Bitterroot Valley in early 1996. Parents, teachers, counselors and other professionals who participate in this program would have common strategies for problem-solving, and discussing children's strengths and needs. Learning these skills would benefit children and families, providing an alternative to harsh and abusive punishment. Parents, day care providers, social service professionals, and school personnel will be encouraged to attend.

The ***Youth, Family, & Schools Enhancement Program*** was developed to assist in meeting the needs of Ravalli County schools and the high risk students and their families. This program is a joint effort between the Bitterroot Valley Education Cooperative, Ravalli County School Districts, Head Start, and the Riverfront Counseling Center. It is an inclusion based treatment program focused on keeping the child in the family and community and out of more restrictive

placements such as: foster homes, therapeutic foster homes, group homes, and residential psychiatric treatment. The targeted population represents Ravalli County's most at-risk families for more restrictive placement, Department of Family Services intervention, Youth Court intervention, school drop-out, runaway, and teen pregnancy. Programs such as the Youth, Family Schools Enhancement Program have a proven record for maintaining children in the community. For example, in the five year history of the Missoula County Day Treatment Program ninety-four percent of the youth enrolled in this county collaborative effort do not end up in out of home placements or more restrictive environments (Missoula County Day Treatment Discharge Records).

Ravalli County school personnel report behavior problems of students as a top problem in the schools today. A recent survey of Ravalli County Schools documented over thirty students who have been identified as seriously emotionally disturbed (SED) under the Individuals with Disabilities Education Act (IDEA). Many more students do not meet the strict SED criteria but are considered to have conduct and behavior disorders. This money will be used specifically to address these youth. The grant will allow three to four of the school's highest priority non-SED children to receive community based interventions for one full year.

The *Youth, Family, & School Enhancement Program* provides a number of resources/services that were lacking or unavailable. 1. Training and assistance for schools and families in developing far reaching behavior change plans and contracts for troubled youth. 2. Assistance for schools and families in developing individualized education and accommodation plans for troubled youth. 3. Identification, linkage and coordination of community services and resources for prioritized students and families. By providing intensive services at the school transportation problem are significantly reduced, therefore increasing participation. A further advantage of this school-based program is to destigmatize mental health programs for the participating youth and family. By allowing the school and mental health staff to provide a united community based format the clients are more acceptable to participating in the needed interventions. A primary objective of these collaborative services is maintenance of the child in his/her family, school, and community.

Respite Child Care services will allow families to participate in various components of the project proposal as well as other services. It will also provide needed time away from stressful parent and child interactions. Respite care is currently underfunded for families of children with developmental disabilities or foster families. There is a pronounced lack of identified providers of respite care.

There are several critical gaps in child cared services that we hope to address with *Respite Child Care*: a) disproportionate number of service providers in the Hamilton area, resulting in a lack of services in other areas of the county; b)minimal evening and weekend services available; c) parents lacking financial resources to pay for child care, d) a lack of identification and training of respite care providers.

Child Care Resources serves as a referral and resource agency for Ravalli County, to training child-care providers and connect them with families who need day care for their children. They have agreed to coordinate the respite-care portion of this grant proposal.

Project Goals:
The committee for the *Ravalli County Family Preservation and Support Services Project* has identified four goals:

1. Support, enhance, and create a continuum of community-based and family-centered services which will develop the existing strengths of the family; and address the needs of families who are accessing resources for themselves and their children.

2. Promote the safety of children and adults in their own homes by helping families obtain services and education which address multiple needs, support family unification and permanency, and alleviate crises.

3. Preserve family structure through keeping youth who present challenging behaviors, in the home, school, and community.
4. Form a steering committee to meet monthly which consists of representatives from each program along with parents of families that are being served. Sub-committees will carry-out individual objectives of the grant.

Target Populations
The Healthy Families of Ravalli County Coalition networking meetings have underscored the reality that our clients have multiple and overlapping needs. In some cases, several agencies serve the same client. In other cases, area agencies serve separate members of one family. Our desire to provide a cohesive continuum of services to families led to collaboration in the first place. This project will empower local agencies to build on this foundation of collaboration. Collaboration has increased interagency referrals and prevented duplication of services. Target families include: families with adolescent parents(s), families at risk for domestic violence, families with children/adolescents who exhibit or at risk for emotional/behavioral disorders, parents who are low-income or low-literate, families served by the valley schools, families who need respite child care. The chart below illustrates the continuum of services provided by the agencies involved in this proposed project.

	Families with children			
	ages birth - 3	ages 3-5	ages 5-12	ages 13-18
FOLLOW-ME	*			*
Respite Care/ASK	*	*	*	*
Head Start		*		
SAFE	*	*	*	*
LVA-Bitterroot	*	*	*	*
Home Visitation Training	*	*	*	*
Parent Competency Training	*	*	*	*
Family Involvement and Outreach Program	*	*	*	*
Youth, Families, & School Enhancement Program		*	*	*

FOLLOW ME - POST-PARTUM HOME VISITATION AND HOME VISITATION TRAINING

TARGET POPULATION

- Families with young children ages birth through three.
- Families of women identified "at risk" through Access Links pregnancy program, a local MIAMI project case management system.
- Families with adolescent parent(s).

OBJECTIVES

1. Strengthen home visitation program for families with children birth through age three by providing a minimum of 150 more home visits a year.
2. Continue collaboration between hospital MIAMI project, Public Health, Department of Family Services, WIC - Women, Infants and Children, and Human Services.
3. A minimum of 12 professionals will attend further training on assessment and home visitation.
4. Every adolescent parent eligible for high school will be given school credit for participation in prenatal education or WIC classes.
5. The Teen Pregnancy Task Force will continue to meet and sponsor two additional fact finding forums.

IMPLEMENTATION PLAN

Marcus Daly Hospital will pilot the identification and assessment component of the FOLLOW-ME program in Ravalli County. This will dovetail with the existing hospital based MIAMI project.

A Registered Nurse will provide one postpartum visit within 48-96 hours after hospital discharge. This person will refer clients for continued intensive follow-up to the Public Health Department. Additional post-partum visits will be provided by this position if public health nurses are unable to follow-up due to staffing or scheduling conflicts.

Training will be provided by H.O.M.E., and Nursing Child Assessment Satellite Training (NCAST) to increase home visitation skills of nurses (hospital and Public Health nurse), social workers (i.e. Hospital, Department of Family Services, Head Start) and teachers who do home visits.

High-risk Pregnancy monthly meetings will continue between the hospital MIAMI project, public health and Department of Family Services.
Adolescent parents will be referred to Child Care Resources so that they may apply for daycare grants.

Networking will continue with the local high schools.

Adolescent parents will be referred to the nearest *Family Involvement and Outreach Program* for information especially in the area of parent competency training.

Continue Teen Pregnancy Task Force focus groups involving schools, health providers and families. These groups will focus on pregnancy prevention and pregnancy peer support.

EVALUATION

The following information obtained will be summarized in quarterly reports for the steering committee:

- Adolescent mothers who remained in school due to availability of daycare grants.
- The number of home visits that the Registered Nurse completes will be documented.
- The number of professionals trained in assessment and home visitation will be documented.
- A short summary will be written regarding the development of the FOLLOW- ME program.

The Registered Nurse will be evaluated at six months and one year of employment.

A written summary of Teen Pregnancy Task Force focus groups will be available in the last quarterly report.

BUDGET

Part-time staff Registered Nurse (20 hours/week, $14/hour)	$ 10,000
Mileage, Travel	$ 500
TOTAL - *FOLLOW-ME: Post-partum Home Visitation*	**$10,500**
Training of personnel doing home visits	
H.O.M.E. ($200/training x 2)	$ 400
NCAST (32 hour training for 10-12 providers)	$ 650
NCAST materials	$ 550
FOLLOW ME workshops($250/workshop x 1 workshop x 3 participants)	$ 750
TOTAL - *Home Visitation and Assessment Training*	**$ 2,350**
Marcus Daly Hospital will provide in-kind match towards Registered Nurses Salary including benefits	$ 5,000

FAMILY VIOLENCE EDUCATION PROGRAM
SAFE: SUPPORTERS OF ABUSE FREE ENVIRONMENTS

TARGET POPULATION

- Elementary, middle, and high-school age children in public and private schools in the valley and adolescents at Trapper Creek Job Corps.

- School personnel of Ravalli County's seven school districts.

- Parent associations attached to various schools.

OBJECTIVES

1. Contact fourteen schools in Ravalli County through the principals and counseling departments by letter and follow-up phone call by September 15, 1995.

2. Schedule and present to a minimum of three classes per week (120 presentations per grant year).

3. Schedule and present two inservice trainings to school personnel per quarter.

4. Schedule and present two informational sessions to Trapper Creek Job Corps students during grant year.

5. Meet with Mental Health Therapist and School Behavior Consultant from the Youth, Family, & School Enhancement Program as needed for information and referral.

6. Provide calendar of training dates to the Family Involvement and Outreach Program sites.

7. Schedule and present to a minimum of four parent organizations during grant year.

8. Develop and implement age-appropriate pre- and post-tests to validate information assimilated about family violence, and use with every presentation.

9. Develop audience evaluation form for use in every presentation to assess presenter's skills and to continue up grading presentation for maximum education benefit.

IMPLEMENTATION

SAFE will hire a person with a strong background in the issues of family violence for 11 months, 40 hours a month, whose only focus will be the *Family Violence Education Project.* His/her responsibility will begin two weeks prior to the opening of school. S/he will collaborate with the staff of SAFE to develop an outreach letter, pre/post tests which are age appropriate and evaluation forms. We will review material from the Domestic Violence Assistance Center (DVAC) in Missoula, the National Coalition Against Domestic Violence (NCADV), and the Jeannette Rankin Peace Center, purchase two new videos, and prepare outlines for presentations which are appropriate for various grades.

SAFE will pay mileage and copying costs for presentations and materials. One day a month will be set aside for staff overview and feedback. Two weeks after the end of the school year will be spent in evaluation and reconceptualization for a stronger program in the following year.

METHOD OF EVALUATION

Evaluative tools for the presentations will be designed by the professional staff of SAFE, using models provided by the Montana Coalition Against Domestic Violence (MCADV), DVAC, and NCADV.

Staff evaluation will be conducted on a monthly basis using SAFE's standard employee evaluation forms.

Quarterly reports will be prepared listing number of children, school personnel and parent reached, and summarizing information for evaluation forms.

BUDGET

One employee, 11 months, 40 hours/month, $7.00/hour gross	$3020
Two videos and pamphlets from NCADV, for children	$ 625
Support (mileage, copying, telephone and supervision)	$ 630
TOTAL	**$4275**
SAFE will provide an in-kind matching fund	$1000
- 100 volunteer hours for presentations, $5/hour	
- 60 volunteer hours working on crisis line with children's calls, $5/hour	
- 20 hours in training in domestic violence, $10/hour	

LITERACY VOLUNTEERS OF AMERICA - BITTERROOT

TARGET POPULATION

- People 16 and older who need tutoring in reading, writing, math and conversational English.

- Parents with children 0-8 years old who are low-income or low-literate.

OBJECTIVES

1. Provide instruction to 25 or more parents on the importance of reading to their pre-school children.

2. Distribute free books to 1 children from 0-8 years old to encourage reading activities in the home.

3. Fifteen or more parents will be recruited into the basic literacy program for individual tutoring to assist with personal educational goals.

IMPLEMENTATION

In order to break the intergenerational cycle of illiteracy, LVA Bitterroot will expand our services in three ways during the project period:

Conduct one training at each Family Involvement and Outreach Program to recruit parents of pre-schoolers for workshops and individual tutoring.

Expand our book distribution program to provide three new books to each Head Start child and their siblings.

Conduct three *Family of Readers* Workshops for parents to help them recognize that they are their children's first and most important teachers.

EVALUATION

Locations, dates, and attendance at trainings will be recorded. The number of parents who sign up for workshops or ask for individual tutoring will be tracked.

Dates, locations, and number of books distributed to Head Start children and their siblings will be tallied.

Dates, locations, and attendance at the *Family of Readers* Workshops will be recorded. Parents will fill out a simple evaluation sheet about what worked and what didn't work in their families.

BUDGET

Books for children: (3 distributions x $2.50 x 125 children)	$ 875
Workshop supplies: (Puppet materials, learning kit supplies, and child care for 25 families)	$ 450
Instructional materials: (GED books, tutor training manuals, books for adult students)	$ 175
TOTAL	**$1500**

FAMILY INVOLVEMENT AND OUTREACH PROGRAM AND LOVE & LOGIC COMMUNITY PARENT TRAINING

TARGET POPULATION

- Parents with students served by valley schools.
- Parents served by the Literacy Volunteers of America, *Family of Readers* program.
- Parents who have chosen to educate their children outside of the public schools.

OBJECTIVES

1. Expand the model *Family Involvement and Outreach Program,* currently hosted in Corvallis, to one additional sites.
2. Assist a minimum of seventy parents, new to the community or uninformed, to gain access to resources.
3. Promote local parent competency training including *Love and Logic*, and *FOLLOW-ME* to a minimum of 20 people.
4. Support the community-wide effort to bring *Love and Logic* workshop, instructed by Jim Fay of the Cline-Fay Institute, into Ravalli County in January 1996 and present it to a minimum of three hundred people.
5. Provide scholarship money for a minimum of ten parents who might not be able to otherwise attend the *Love and Logic* workshop.
6. Serve as a clearinghouse for information about the programs involved in the *Ravalli County Family Preservation and Support Services Project.*
7. Schedule a minimum of two *Love and Logic* parent competency training classes in the fall of 1995 and spring of 1996 in Ravalli County.

IMPLEMENTATION

Two parent volunteers will be hired by August 15, 1995. The responsibility of the parent volunteers would include:

- Provide the first contact for new parents upon student registration.
- Familiarize the new and interested uninformed parents with the resources available in the schools and community.
- Seek parent and staff input regarding desired resource materials.
- Purchase parent education material for the Corvallis site and for two new sites.
- Assemble resource materials and information.
- Develop a system for disseminating materials and information.
- Orient staff regarding role of the *Family Involvement and Outreach Program.*
- Staff telephone line to answer parent questions.
- Plan and present fall kindergarten orientation to parents.

- Provide information to grant coordinator regarding functioning of this pilot program to assist in the development of the other two programs.
- Be familiar with the parent competency training programs available in Ravalli County, providing a common language for discussion of children's needs and problem solving.

The two parent volunteers for the model program, at Corvallis, will be trained regarding the *Ravalli County Family Preservation and Support Services Project* so they can accurately provide information about the programs involved. This training will occur by September 1, 1995.

One additional program sites will be located by October 1, 1995 and two volunteers for each site will be hired by October 31, 1995. These parent volunteers will be trained by the model program volunteers, this will be completed by November 20, 1995. The additional site locations will be determined by parent volunteers and school personnel contacting Ravalli County schools.

Family Involvement and Outreach Program site locations, services provided and hours will be advertised with *Ravalli Tele-Link.* Flyers with this information will be posted at schools, social services agencies, churches, and commercial locations.

Family Involvement and Outreach Program sites will be used for the *Literacy Volunteers of America, Family of Readers* activities.

Volunteer committees, consisting of parents, teachers and other professionals, are currently in place and continue to develop plans for the *Love and Logic* workshop presented by Jim Fay.

Scholarship money will be made available for parents to attend the *Love and Logic* workshop. Parent volunteers, Chapter 1 staff and the grant coordinator will assist in determining what requirements are needed for scholarship eligibility.

METHOD OF EVALUATION

The following information obtained will be summarized in quarterly reports for the project steering committee:

All calls, visits and resources checked out will be logged by the parent volunteers.

A survey/evaluation form will be developed and distributed to school personnel ad community organizations where parents are referred. This form will generate information regarding how many parents became involved after being referred by the *Family Involvement and Outreach Program,* and feedback about the program including recommendations for changes.

Parents who use the services of the *Family Involvement and Outreach Program* will be asked to complete an evaluation.

The number of parents attending parenting classes will be tracked.

BUDGET

Family Involvement and Outreach Program each site:		
- Stipend, 10 months, 22 hours/month, $5.50/hour, 2 volunteers	$2435	
- Resource material (books, video tapes, etc.)	$ 640	
- Training day at Roosevelt Family Resource Center in Missoula (salary: $33; mileage: $30; per diem: $37)	$ 100	
Total for each site	$3175	
Two *Family Involvement and Outreach Programs*		$6350
Scholarship money for parents to attend parenting workshop		$ 500
TOTAL -*Family Involvement and Outreach Programs*		**$6850**

Love and Logic Workshop this will cover a portion of the cost (presenter, travel, lodging) to bring this workshop to Ravalli County	$2570
TOTAL - *Love and Logic* Community Parent Training	**$ 2570**

Matching cash fund from other schools and community organizations for the *Love and Logic* Workshop $ 7430

YOUTH, FAMILY & SCHOOLS ENHANCEMENT PROGRAM

TARGET POPULATION

- *Preschool through high-school age children and adolescents* who exhibit or are at risk for a) emotional/behavioral disorders, b) conduct disorders, c) out of home placement, d) delinquent or criminal behavior, e) failure in school, f) dropping out of school. There is an emphasis on early childhood intervention.

- *Families* that have children/adolescents who exhibit or are at risk for a) emotional/behavioral disorders, b) conduct disorders, c) out of home placement d) delinquent or criminal behavior, e) failure in school, f) dropping out of school.

OBJECTIVES

1. To develop and implement of four behavior change plans and contracts as needed for youth with identified damaging behaviors.

2. Team meetings with parents for support, identifying behavior change needs, and developing strategies to make these changes. These meetings will occur a minimum of two times a month.

3. Provide one training per location for the parent volunteers of the *Family Involvement and Outreach Program* to familiarize them with the *Youth, Family, and School Enhancement Program* and the services it provides.

IMPLEMENTATION

Targeted youth and families will receive special education and mental health services in their neighborhood schools that promote positive behavior changes for the youth and his/her family. Behavior change plans and contracts will be developed and implemented by the Enhancement team. The behavior management intervention, IEP goals and mental health interventions will be collaboratively designed by the parents or guardians, the school, Head Start, the School Behavior Consultant, and Mental Health Center staff. The instructional assistants will receive training and supervision from either the program therapist in coordination with the behavior specialist or the school behavioral consultant.

The mental health therapist will meet with parents weekly to identify behavior change needs by the youth and in the home, and develop strategies to assist in making these changes. These meetings will also be a time for parents to receive support and validation for the positive efforts that are being done in the home.

The School Behavior Consultant will provide the parent volunteers at the *Family Involvement and Outreach Programs* information/training on this program. This training will occur within one month of their employment.

METHOD OF EVALUATION

The current form of evaluation is a Behavioral Rating Scale that is completed at the beginning of the provided services and each month thereafter. The behaviors that the youth presented during the prior month are collected from the home, school and community. Behaviors that are tracked include: overactivity, physical aggression, verbal abuse, ability to stay on task, non-compliance, externalizing responsibility, unusual behaviors, and self-injury. Each behavior is rated on frequency and interventions and personal progress are noted.

A second form of evaluation is the Child Behavior Checklist (T. M. Achenbach). The checklist will be administered every six months and the youth's behavior will be compared with other children who exhibit similar at risk behavior but who are not receiving mental health services.

BUDGET

The cost for one youth and his/her family includes:			
6 hours/week of school based mental health services	$ 60		
1 hour of outpatient family based therapy a week during the school year	$ 72		
Weekly cost per student	$ 132		
Total cost for school year (figuring 90% attendance or 33 weeks)		$ 4,356	
Throughout the summer the mental health therapist and mental health behavior specialist will provide on-going contact to prevent regression.		$ 612	
Supplies (expendable therapeutic materials)		$ 32	
Total cost per youth and his/her family		$ 5,000	
TOTAL - 4 openings for youth and his/her family including summer program			**$ 20,000**

Riverfront Counseling Center will provide an in-kind matching fund for this program to make-up for the diffeence of 14.3% reduction of the $20,000 and provide an additional 20 hours of family based therapy for the 4 youth covered by this budget. $4,000

- Cost for 1 child and his/her family (figuring 70% attendance)

RESPITE AND ACCESS-TO-SERVICES (ASK) CHILD CARE THROUGH CHILD CARE RESOURCES

TARGET POPULATION

- Families of children between the ages of 0-12 who are participating in the services of this proposed project.

- People referred for counseling by the court for domestic abuse offenses.

OBJECTIVES

1. Provide regular, as needed or emergency basis respite care to families in crisis or at risk of being in crisis.

2. Provide families with greater ability to access the services of the proposed project as well as other services.

IMPLEMENTATION PLAN

The grant coordinator and the steering committee will determine: eligibility requirements for families requesting respite child care, the percentages of respite funds being allocated to the project organizations, and how referrals will be made to Child Care Resources

The grant coordinator will authorize respite services after consulting with the agencies that serve the identified families.

Parents will access respite services to gain a break from stressful family situations on a planned or emergency basis. Through these services parents will become better educated consumers of day care services.

Child Care Resources will identify other day care funding options outside this project, as a first option, so that the Respite/ASK program will be a last resort source of funding for those who have no other options.

Child Care Resources will assist families in determining their eligibility for day care funding from other sources, make appropriate referrals to existing day care facilities, provide ongoing training to licensed and registered facilities, and assist in the development of further respite and day care resources.

Child Care Resources will develop a respite-care network that will connect parents with caregivers for respite that is planned, emergency, or recreational.

EVALUATION

Consumers of respite care will be described, the amount of respite moneys used by each component of this proposed project and each consumer will be accounted for.

Participants will be interviewed to determine satisfaction with services and identify needed improvements in the process.

A record of the nature of the requests for this service will be documented.

The steering committee will review the demand and use of this service quarterly and make any necessary changes.

BUDGET

Child Care Grants and development of provider network	$10,700
TOTAL	**$10,700**

GRANT COORDINATOR

The Coordinator position is a part-time position that assists linkage between collaborating agencies of this project.

The Coordinator's responsibilities will include but not be limited to:

1. Schedule monthly steering committee meetings and notify project members. Keep notes of all meetings.

2. With approval from the steering committee, contract with the local taxi company to assist families who have no means of transportation. Monitor availability of funds and authorize payments for transportation services.

3. Compile evaluation materials and coordinate writing the grant review.

4. Assist in on-going linkage of agencies involved in the grant and encourage collaborative efforts in the community to include such entities as Youth Court, private mental health service providers, chemical dependency service providers.

5. Make existing service providers and recipients aware of proposed funded services and how to access them.

6. Attend sub-committees meetings as needed to monitor progress of grant objectives, development of additional family involvement and outreach sites.

7. Work with *Family Involvement and Outreach Program* sites in determining their specific needs.

The Coordinator position will be advertised throughout the valley and a hiring committee, with members from agencies participating in the grant, will be responsible for interviewing and hiring a person to fill this position. The Coordinator will be hired by September 15, 1995.

The Coordinator will be evaluated by the steering committee at six months and one year.

BUDGET

Coordinator Salary ($10 x 12 hours/week x 52 weeks)	$ 3,465
Support Cost (postage, copying, phone calls, supplies, mileage)	$ 400
Transportation for Families	$ 250
TOTAL	**$ 4,115**

Early Childhood Collaboration Project will provide a cash match towards the Grant Coordinator's salary	$ 3,000

FAMILY PRESERVATION & SUPPORT SERVICES PROJECT
OVERALL BUDGET

Program	Grant Request	Matching Funds
Home Visitation Training	$ 2,350	
Follow Me/Post-partum Home Visitation	$10,500	
Marcus Daly Hospital (in-kind)		$ 5,000
SAFE/Supporters of Abuse Free Environments	$ 4,275	
SAFE (in-kind)		$ 1,000
Literacy Volunteers of America - Bitterroot	$ 1,500	
Love and Logic Community Parent Training	$ 2,570	
Community Schools (cash)		$ 7,430
Family Involvement and Outreach Program	$ 6,850	
Youth, Family & Schools Enhancement Program	$17,140	
Riverfront Counseling Center (in-kind)		$ 4,000
Respite Child Care	$10,700	
Coordinator, Administrative, and Transportation	$ 4,115	
Early Childhood Collaborative Project (cash)		$ 3,000
Family Preservation and Support Services Steering Committee (in-kind)		$ 1,500
TOTAL	**$60,000**	**$21,930**

Managing Resources Montana
Region V
Resources Inventory As Of 5/14/94

PROVIDER	COUNTY	CAPACITY	SERVICE	AGES SERVED
Youth Guidance Home	Flathead	8	Group home	14-18
Mental Health Center	Flathead	12	Therapeutic foster care	0-18
Mental Health Center	Flathead	16-20	Family-based services	0-18
MHC-Evergreen School	Flathead	8-10	Middle school day treatment	10-14
Mental Health Center	Flathead	11/week	Outpatient Therapy: individual & group	
Mental Health Center	Flathead	30-42	Children's case management	0-18
Northwest Family Recovery	Flathead		Sexually reactive/sexual offender treatment	
Wilderness Treatment Center	Flathead		Inpatient chemical dependency treatment	
Adolescent Alcohol & Drug Services	Flathead		Outpatient chemical dependency treatment	
Comprehensive Development Center	Flathead		Family support to children w/developmental disabilities	
Flathead Council for Families	Flathead		Parent training	
Nurturing Center	Flathead		Parent training	
Pathways/Kalispell Regional Hospital	Flathead	10	Inpatient chemical dependency treatment	12-18
Pathways/Kalispell Regional Hospital	Flathead	10	Inpatient acute psychiatric treatment	12-18
Approximately 50 private practitioners	Flathead		Outpatient therapy	
Approximately 50 Psychiatrists	Flathead		General psychiatry	
Flathead County	Flathead		Youth detention facility	
Flathead Valley Chemical Dependency Clinics	Flathead		Outpatient chemical dependency treatment	
Second Circle Lodge/Tribal Social Services	Lake	12	Shelter care/group home	12-18
Youth Guidance Home	Lake	7	Group home	12-18
ASAP/Salish-Kootenai Tribes	Lake		Outpatient chemical dependency treatment	
Juvenile Probation Office-after school program	Lake	40	After-school support program for juvenile offenders	
Missoula Youth Homes	Lake		Therapeutic Foster Care	
Mental Health Center	Lake	7/week	Outpatient Therapy: individual & group	
Mental Health Center	Lake	10-14	Children's case management	0-18
Blue Bay Healing Center	Lake		Salish-Kootenai Healing Center	
Turtle Lake School/Rivendell Butte	Lake		Day treatment	
Approximately 5 to 8 private practitioners	Lake		Outpatient therapy	
Lake County Chemical Dependency Services	Lake		Outpatient chemical dependency treatment	
Lite Link/Juvenile Probation	Lincoln		Intensive, in-home services, mentoring & mediation	

Appendix A

Managing Resources Montana
Region V
Resources Inventory As Of 5/14/94

PROVIDER	COUNTY	CAPACITY	SERVICE	AGES SERVED
Lincoln Co. Champion Youth Guidance Home	Lincoln	8	Group home	13-18
Mental Health Center	Lincoln	7/week	Outpatient therapy	
Mental Health Center	Lincoln	10-14	Children's case management	0-18
Mental Health Center	Lincoln	4	Therapeutic foster care	0-18
Headstart in Eureka	Lincoln		Child care/parent training	
Recovery Northwest	Lincoln		Outpatient chemical dependency treatment	
Approximately 4 private practitioners	Lincoln		Outpatient therapy	
Approximately 1 Psychiatrist	Lincoln		Psychiatric consultation	
Mental Health Center	Mineral	3/week	Outpatient therapy	0-18
Mental Health Center	Mineral	3/week	Children's case management	0-18
Recovery Northwest	Mineral		Outpatient chemical dependency treatment	
No private practitioners	Mineral	none	Outpatient therapy	
SABER/Dr. Mike Scolatti	Missoula		Sex offender treatment	
Community Care, Inc.	Missoula		Outpatient chemical dependency counseling	
Comprehensive Development Center	Missoula		Family support to children w/developmental disabilities	
Child & Family Resource Council	Missoula		Parent support groups and training	
Headstart	Missoula		Child care and parent training	4-5
Friends To Youth	Missoula		Outpatient therapy: individual and group	
Friends To Youth	Missoula	16-20	Family-based services	0-18
Friends To Youth	Missoula	10-12	Family-based services specifically for SED youth	0-18
Tom Roy Group Home/Missoula Youth Homes	Missoula	7	Group home	13-17
Talbot I/Missoula Youth Homes	Missoula	8	Therapeutic group home	13-18
Talbot II/Missoula Youth Homes	Missoula	8	Therapeutic group home	13-18
Shirley Miller Attention Home/Missoula Youth Homes	Missoula	12	Shelter care	10-18
Therapeutic foster care/Missoula Youth Homes	Missoula	29	Therapeutic foster care	4-17
Extended Family Services	Missoula	12	Shelter care	0-12
Providence Center/St. Patrick Hospital	Missoula	4-5	Inpatient acute psychiatric care	12-18
Providence Center/St. Patrick Hospital	Missoula	10-12	Partial hospitalization/day treatment	12-18
Mental Health Center	Missoula	43/week	Outpatient therapy: individual & group	
Mental Health Center/Headstart	Missoula	10-12	Preschool day treatment	3-5

Managing Resources Montana
Region V
Resources Inventory As Of 5/14/94

PROVIDER	COUNTY	CAPACITY	SERVICE	AGES SERVED
Mental Health Center/School Dist #1/Roosevelt School	Missoula	10-12	Elementary day treatment	5-12
MHC/School Dist #1/Rattlesnake/Meadow Hill	Missoula	10-12	Middle school day treatment	12-14
Mental Health Center/Bonner School	Missoula	8-12	Day treatment	6-11
MHC/Missoula County High School/Sentinel	Missoula	10-12	High school day treatment	15-18
Mental Health Center/Turning Point	Missoula	8-10	Intensive outpatient chemical dependency treatment	12-18
Mental Health Center	Missoula	50-80	Children's case management	0-18
Approximately 180 private practitioners	Missoula		Outpatient therapy	
Approximately 9 Psychiatrists	Missoula		General psychiatry (one child psychiatrist)	
Missoula Indian Center	Missoula		Outpatient chemical dependency treatment; family support	
Headstart	Ravalli		Child care/parent training	
Trinity Ranch	Ravalli	6	Group home	8-12
Mental Health Center	Ravalli	8/week	Outpatient therapy: individual & group	0-18
Mental Health Center	Ravalli	10-14	Children's case management	0-18
Approximately 7 private practitioners	Ravalli		Outpatient therapy	
Approximately 1 Psychiatrist	Ravalli		Psychiatric consultation	
Crossroads	Ravalli		Outpatient chemical dependency treatment	
Mental Health Center	Sanders	3/week	Outpatient therapy: individual & group	0-18
Mental Health Center	Sanders	5-7	Children's case management	0-18
Open Gate Ranch	Sanders	12	Group home	10-18
Approximately 2 private practitioners	Sanders		Outpatient therapy	
Northwest Recovery	Sanders		Outpatient chemical dependency treatment	

DEPARTMENT OF FAMILY SERVICES
FAMILY SUPPORT STAFF TRAINING

VISION: Empowering families by empowering DFS staff across the agency.

GUIDING PRINCIPLES FOR FAMILY SUPPORT TRAINING

1. The basic relationship among DFS staff is one of equality and respect. The first priority of DFS family support training is to establish and maintain this relationship as the vehicle through which growth and change can occur.

2. DFS staff need time, skill and support to build both formal and informal relationships with other DFS staff and with other agency staff, emphasizing trust, respect and empowerment.

3. All DFS staff may need assistance at some point in their personal and/or professional development to manage difficult job stresses, to learn more appropriate job skills, and to be supported in their DFS roles.

4. DFS staff throughout the state represent a wellspring of experience and talent which must be nurtured and utilized in order to carry out DFS training goals. Training programs facilitate DFS staff serving as resources to each other, participating in program decisions and governance, and advocating for themselves and their clients in the broader DFS community.

5. Training programs are staff-driven, responding to the staff's stated needs rather than a predetermined training schedule.

6. Training programs are community-based and culturally and socially relevant to DFS staff.

7. Training programs are essential and important to job performance. Seeking support and information are viewed as a sign of staff strength, not as indicative of deficits and problems.

8. Expectations for family support training programs must be kept modest and commensurate with the means they employ -- they are not a substitute for basic agency resources, e.g. adequate staffing, etc.

9. For the family support training to adequately meet the varied needs of DFS staff, it is critical that the training program utilize a multi-disciplinary, collaborative approach and that it has solid organizational and financial foundations and technical assistance when appropriate.

10. DFS staff training will focus on strengthening the staff's skills proactively, and will offer a variety of learning opportunities to the staff on a continual basis.

DEPARTMENT OF FAMILY SERVICES
FAMILY SUPPORT STAFF TRAINING

RECOMMENDED STRATEGY FOR CONSIDERATION BY DFS TRAINING COMMITTEE

The following is a three year and three tier approach (state, regional and county) for family support training:

Year One: Target Supervisors (have the most impact with large numbers of individuals: part of management and part of workers) and Extended Management Team

Promote worker opportunities currently available through DFS that parallel family support principles: MCAN, Cultural Diversity, Investment in Excellence, Partnership projects, DFS Central Resource Library, Supervisor's training, local and regional conferences

Year Two: Evaluate Year One Activities and expand

Year Three: Cross-agency training (with those agencies under contract with DFS and with those providing parallel services)

ACTION STEPS:

1. Present Strategy and background information to DFS training committee on Oct. 4, 1994 for feedback and input.

2. Present Strategy and background information to Extended Management Team end of October and explore:
   - 2.1 prioritizing their training needs relevant to family support suggested topics
   - 2.2 when, how and with whom to conduct training(s)

3. Present Strategy and background information to Supervisors at December quarterly meeting and explore:
   - 3.1 prioritizing their training needs relevant to family support suggested topics
   - 3.2 when, how and with whom to conduct training(s) (e.g. use of interactive technology, training at quarterly meetings on topics of interest to all supervisors, trainings at regional meetings for more specific topic requests)

4. Development of information network system

Members of the Family Support Training Subcommittee will present the following agenda at the Oct. 4 meeting:

Framework for Designing Family Support Training - Kate
Suggested Guiding Principles for Family Support Training-Sue
Identifying Barriers and Opportunities to Training - JoAn
Family Support Training Topics and feedback - Judy
Suggested Action Steps and feedback- Rick

DEPARTMENT OF FAMILY SERVICES
FAMILY SUPPORT - STAFF TRAINING ASSESSMENT

The following topics represent training modules recommended for family support training by the DFS Training Committee. These modules were developed from recommendations by national training centers on family support and by committee members. The committee recognizes that many staff already have a strong foundation in family support principles and practice. This assessment will assist the committee in meeting your specific training needs regarding family support.

Please indicate with an "X" which topic would meet your training needs and whether you want "basic" or "on-going" training. "Basic" is defined as introductory information on the topic (e.g. philosophy, definitions, how does this fit with DFS' mission, what are the general practices indicated). "On-going" refers to putting the specific topic into action (e.g. practical application, challenges presented, problem-solving, etc.). These two categories will allow training which builds on the variety of expertise among DFS staff.

Also attached to this survey are the "Guiding Principles for Family Support Training" which serve as the basis for DFS training opportunities.

TOPIC	BASIC	ON-GOING
1. HOW TO SUPPORT GROWTH IN FAMILIES. Review of family centered service, role of program staff, program goals, skills necessary in meeting staff responsibilities, how to build trusting relationships with families, how to introduce program to families and guidelines for initial home visits, building on family strengths.		
2. ASSESSING FAMILY PROGRESS AND EFFECTIVE INTERVENTIONS. Hands-on experience in observing and documenting home visits with emphasis on status of home, child and parent, and observing parent-child interactions. Ways to effectively intervene in planning for future interventions.		
3. VALUES CLARIFICATION AND SETTING APPROPRIATE LIMITS. Examine what makes us who we are, concepts of unresolved personal issues, rescuing vs helping.		
4. MAINTAINING PERSONAL WELL-BEING. How to maintain energy, commitment, and optimal physical, emotional, and spiritual health. Understanding "limits to growth" and dealing with workers who feel "stuck."		
5. PROVIDING SERVICES TO CULTURALLY DIVERSE FAMILIES. Explore concept of culture, identifying issues that prohibit or impact quality services. Help workers develop acceptance and respect for different cultures.		

TOPIC	BASIC	ON-GOING
6. SAFETY ISSUES: PERSONAL, HOME AND COMMUNITY ENVIRONMENT. Basic guidelines for personal health and safety for home visitors; basic information on how to create a safe home environment for children, and how to present information in a non-judgmental manner respectful of cultural values.		
7. COMMUNICATION SKILLS. Enable clear transfer of ideas & thoughts using spoken, unspoken, written methods and active listening skills.		
8. PROBLEM-SOLVING SKILLS. Learn appropriate methods to assist in working through and addressing issues and challenges encountered in providing services to families and in helping families learn to solve their own problems.		
9. WORKING EFFECTIVELY WITH PARENTS. Strategies for various learning, teaching, and counseling techniques. Skills and practice to engage reluctant clients and defuse upset clients. Explore appropriate interventions for addressing crisis with clients, team members or personally.		
10. DOMESTIC VIOLENCE. Explore dynamics of domestic violence, appropriate methods of intervention by home visitor including maintaining personal safety.		
11. ASSESSING AND ENHANCING SOCIAL SUPPORTS (FORMAL & INFORMAL). Strategies for assessing a family's social support network and needs. Interventions to enhance social supports & maintain progress & behavioral changes.		
12. FAMILY LIFE CYCLE DEVELOPMENT. Review of various life stages and their impact on family support.		
13. METHODS FOR DEALING WITH EXPLOITATION OF THE ELDERLY.		
14. HOW TO DEAL WITH SERIOUSLY EMOTIONALLY DISTURBED CHILDREN AND WITH SEX OFFENDER CLIENTS.		
15. OTHER TOPICS:		

APPENDIX 8:

JUVENILE CORRECTIONS DIVISION (JCD), MONTANA DEPARTMENT OF CORRECTIONS

PROGRAM: BUILDING RESTORATIVE JUSTICE FOR MONTANA'S YOUTH

GOALS: *The mission of this program (transferred 7/1/95 from the former Montana Department of Family Services (DFS) to the new Montana Department of Corrections) is to provide a statewide continuum of service to assess, treat, and control adjudicated, delinquent youth placed in its care emphasizing accountability, public safety and competency development. Continued collaboration, planning and resource-sharing with the program staff of the new Department of Public Health and Human Services (incorporating Montana DFS programs) will occur to preserve JCD's philosophy of youth corrections developed under the Department' auspices.*

PINE HILLS SCHOOL:
Is dedicated to creating a quality environment where all human beings are treated with respect, staff and students, as we ourselves would require others to treat us.

Strives to provide rehabilitation services for each youth based on diagnostic, classification and historical information.

Strives to provide a safe and humane environment conductive to and in conjunction with the rehabilitation process.

Continues to strive to provide administrative, professional, logistical and financial support necessary to meet Montana's need for rehabilitation of juvenile offenders.

MONTANA YOUTH ALTERNATIVES:
To provide an effective public/private program for adjudicated youth, their families, and communities that emphasizes accountability, competency development and public safety.

JUVENILE CORRECTIONS PAROLE/TRANSITION SERVICES:
To accurately represent JCD in determining the most appropriate treatment option for youth at the time of youth court referral.

To assist families of committed youth in addressing needs allowing for the successful return of the youth to the home.

To tailor the placement plan of youth being considered for release allowing for satisfactory adjustment. To develop meaningful opportunities for youth on placement status.

ACTION STEPS AND TIME LINES FOR OBJECTIVES:

Objective 1: JCD will provide the least restrictive and most appropriate setting for the youthful offender balanced with the need to provide community protection.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Youth Placement Committees will involve community professionals in a collaborative effort of case planning for delinquent youth. The committee will consider the age, treatment needs, and cost of care when providing placement recommendations to the judge prior to the dispositional hearing.	Placement Committee members Juv. Parole Officers	On-going
2. 100% of youth placed into the Montana Youth Alternative Program will be reviewed by the Placement Committee.	Youth Court	July 1, 1995
3. 80% of adjudicated youth placed will be reviewed by the Placement Committee.	Youth Court	July 1, 1995
4. 95% of adjudicated youth placed will be reviewed by the Placement Committee.	Youth Court	July 1, 1997
5. 100% of adjudicated youth placed will be reviewed by the Placement Committee.	Youth Court	July 1, 1999
6. JCD will contact Juvenile Probation on a weekly basis.	Juvenile Parole	On-going
7. Training in the Balanced Approach, Strategies for Juvenile Supervision, Placement Guidelines, and Current Best Thinking.	JCD Training Officer	On-going
8. JCD will attend and participate in all Youth Placement Committee meetings that are predicated to impact the Juvenile Corrections Division.	Juvenile Parole	On-going

Objective 2: JCD will insure that Youth Placement Committees take into consideration the Montana Secure Care Placement Guideline and Strategies for Juvenile Supervision Classification prior to a placement decision.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. 100% of adjudicated youth screened by the Youth Placement Committee will have a SJS Supervision Classification and Secure Care Guideline Score included in the Placement Committee recommendations.	Youth Placement Committee	July 1, 1995
2. JCD will make arrangements for the completion of the Placement Guidelines and SJS prior to the Youth Placement Meeting.	Parole Officers	On-going
3. JCD will provide on-going training for Youth Placement Committee Members, Probation Officers, County Attorneys and District Judges.	Staff Development and Training Officer	No less than once a year

Objective 3: JCD will provide secure-care programs for only those youth demonstrating a present danger to the community.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Release authority issues will be resolved and clear policy and procedure will exist.	JCD personnel Department staff	January 1, 1996
2. Revocation issues will be resolved through Departmental collaboration, recognizing the youth is committed to the Department of Corrections not exclusively to the Juvenile Corrections Division and is entitled to the most appropriate placement, taking into account the youth's needs and facilities assets and/or limitations.	JCD Parole Officers; Department RAs; JCD Superintendents	January 1, 1996
3. Length-of-stay guidelines will be in place for Pine Hills School and Juvenile Transition Centers.	PHS staff, JCD Field Service Staff including Parole Officers, Transition Centers Staff	January 1, 1996

4. Clear release policy and procedures which are equitable for all parties will be developed.	PHS staff, MYA staff, JCD Field Service Staff including Parole Officers, Transition Center Staff	January 1, 1996
5. 100% of youth entering Pine Hills will have a tentative release date within 30 days. PHS staff in collaboration with Division Field Staff will be responsible for developing tentative release dates within 30 days for all youth placed into PHS.	PHS staff, JCD Parole Officers	January 1, 1996
6. Negotiations and Interpersonal Communications Training will be presented.	JCD Training Officer	January, 1996

Objective 4: JCD Transitional Living facilities will increase their programing to reflect the mission of the Department of Corrections while pursuing the Division strategic plan objectives, "The Department will reorient the State's over-reliance on secure care facilities for delinquent youth while strengthening community-based correctional services that are in the best interest of the community and its youth."

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Transition Centers will have definable identifiable programing. Transition Center Supervisors in collaboration with community agencies, Department personnel and appropriate experts will meet to develop programming.	JCD Transition Center Supervisors, JCD Parole Officers, Appropriate experts	July 1, 1996
2. Establish one new 12-bed Transition Center in Western Montana enabling youth transition to take place in closer proximity to their families and community. Division personnel will pursue steps necessary to develop an additional transition center.	JCD Administrative Staff, Montana State Legislature	July, 1998
3. Resource materials will be purchased for the training library.	JCD Training Officer	Annually
4. Program-implementation training will be presented.	JCD Training Officer, Contracted Trainers	On-going

Objective 5: JCD will provide an array of community-centered programs in as close a proximity to the youth's family as possible. The Juvenile Corrections Division in partnership with youth courts and other agencies will provide preventative programs for working with adolescents which serve as alternatives to custodial maintenance in institutions.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Monitor community grants to insure compliance with stated goals and objectives.	Program Director	On-going
2. Re-allocate unexpended community grant funds to insure community centered programing is maximized.	Program Director	On-going

3. Provide community program development and liaison and interfacing services for the Juvenile Corrections Division.	Parole Officers Program Director Training Officer	On-going

Objective 6: JCD will insure linkage to human service programs and community resources. The Parole Officer will assume case management responsibilities for cases following a youth court disposition, in order to insure continuity of services throughout the time the youth remains under the supervision of the Department. The Parole Officer must be aware of alternative programs available and how to access those programs for appropriate clients.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Attend Regional/Local Advisory Council Meetings and any other local or Regional meetings that directly impact the operations or functions of the JCD.	Juvenile Parole Officers	On-going
2. Monitor all contracted services such as mentors, trackers, etc. on a regular basis.	Juvenile Parole Officers	On-going
3. Individuals providing direct services will be contacted weekly for case review.	Juvenile Parole Officers	On-going
4. Current and updated Resource Material will be available for reference from the training library.	JCD Training Officer	On-going
5. Association with Youth Court workers, schools, district judges, prosecutors, mental health personnel, Regional Administrators and staff, and the community.	Juvenile Parole Officers, Transition Center Supervisors	On-going

Objective 7: JCD will hold youth accountable for their criminal behavior in a manner consistent with their individual needs. Pine Hills School will use a multi-disciplinary approach to assess the needs of each youth. The multi-systemic approach of Montana Youth Alternatives (MYA) Program, will view the juvenile offender as living in an environment of interconnected systems encompassing individual, family and extra-familial (peer, school) factors; and program interventions will be designed to encompass public safety, accountability and competency building.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. After assessing the youth's behavior; reviewing past social and criminal history; and determining the youth's areas of strengths and weaknesses, an individual case plan will be developed.	PHS staff	On-going
2. Treatment planning begins at admission with an intensive assessment of the youth's strengths and needs, and continues throughout all segments of the program.	MYA Phase I, II, III and IV staff	On-going
3. The youth is evaluated during the Orientation Program.	MYA Phase I staff	On-going
4. An intervention program is designed to address behaviors of opposition and non-compliance.	MYA Phase II staff	On-going
5. A program which involves community work projects, personal development, and education is developed for each youth.	MYA Phase III staff	On-going
6. Balanced Approach, Restorative Justice, and Current Best Thinking training is presented.	JCD Training Officer, contracted trainers	On-going
7. Resource materials are purchased for training library.	JCD Training Officer	On-going

Objective 8: JCD will promote maximum family involvement and facilitate a realistic relationship between youth and their families.

ACTION STEPS TO BE TAKEN	PERSONS RESPONSIBLE	COMPLETION DATE
1. Families will be strongly encouraged to accompany youth to the Montana Youth Alternatives Program facility.	Admission/ Transition Coordinator	On-going and continuous
2. Families will be encouraged to become active participants in the MYA program plans for the youth.	MYA Program counselors	On-going and continuous

3. All students that have the opportunity for family support will be encouraged to address issues of communication and relationship.	MYA Program counselors, PHS counselors, Transition Center Staff	On-going and continuous
4. Youth will be given the opportunities to have family visits or even the possibility of returning home for short visits.	PHS Staff, MYA staff, Parole Officers, Transition Center Staff	On-going and continuous
5. Assist the Youth Court in developing appropriate dispositional recommendations which include family support and preservation.	JCD Parole Officers, JCD field staff, Youth Placement Committees	On-going and continuous
6. JCD staff will attend Department Advisory Council Meetings on a regular basis to keep them apprised of JCD activities.	JCD Central Office Staff	On-going and continuous
7. Family support and preservation training for JCD staff and community service providers will be presented.	JCD Training Officer, Contracted trainers	On-going and continuous
8. Develop and implement community-based training programs for families.	JCD Training Officer, JCD field staff, Youth Courts	January 1, 1997

CONTRACT ATTACHMENT
Evaluation Project Activities and Timelines

Trankel Research & Analysis
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MARCH - SEPT, 1995:

- Continue to prepare individualized research plans and conduct initial evaluation training sessions at each new Partnership site.
- Ongoing training of Partnership participants regarding evaluation procedures, data collection forms, and data input in the *Paradox* database program.
- Remain available to provide ongoing technical assistance and make site visits as requested by Partnership sites.
- Conduct evaluation training sessions at each of the five DFS regions for persons involved in the *Family Support & Family Preservation* programs.
- Development of suggested forms to be used by staff involved with the FS/FP program to gather information on measurable outcomes and demographic profiles of families at risk for abuse and neglect. Forms will include portions of data being gathered for the Partnership project in order to allow statistical comparisons to be made between different program strategies and their effects on different family types.
- Input of data collected by FS/FP participants.
- Continue gathering baseline and historical data on DFS placements to establish a profile of clients referred to the Department to date.

JUNE 30, 1995:

- Quarterly progress report to DFS.

JULY - AUG, 1995:

- Perform initial statistical analyses of the demographic, baseline, and pre-test data gathered to date.
- Submit sample reports to DFS to gather feedback regarding appropriate report formats for the information gathered.
- Continue follow-up visits and technical assistance to DFS staff, and Partnership and FS/FP participants.

SEPT 30, 1995:

- Mid-Year Evaluation Report to DFS.

OCT - DEC, 1995:

- Perform statistical analyses of the post-test data gathered.
- Interview DFS and community service staff, and have interviews transcribed; begin qualitative analysis of program effectiveness and suggested changes.
- Continue follow-up visits and technical assistance to DFS staff, and Partnership and FS/FP participants.

DECEMBER 31, 1995:

- Quarterly progress report to DFS.
- Preliminary report to Legislature regarding initial findings from the Partnership Project.

JANUARY - MARCH, 1996:

- Continue data collection and analysis of qualitative and quantitative data gathered.
- Prepare reports and make oral presentations regarding evaluation process, as requested by DFS.
- Continue follow-up visits and technical assistance to DFS staff, and Partnership and FS/FP participants.

MARCH, 1996:

- Year-End Report submitted to DFS.

SITE EVALUATION PLAN

VISION: To reduce child abuse and neglect by empowering families to build upon their strengths and by helping them acquire knowledge and skills for healthy family functioning; and to promote healthy communities through collaboration of people, families, services and agencies.

MISSION: Establish a flexible, proactive and intensive home visitor service in four Montana communities (Miles City, Glendive, Sidney and Glasgow).

EASTERN MONTANA PARTNERSHIPS PROJECT

Miles City, Glendive, Glasgow, Sidney

Evaluation Research Design

OBJECTIVES	ACTIVITIES	EXPECTED OUTCOMES	ASSESSMENT TOOLS
COMMUNITY-based Objectives/Outcomes			
1. Promote partnerships (collaboration) among existing community organizations to provide a comprehensive continuum of services for families at risk.	✓ Establish oversight committee to coordinate efforts of the local contractors in all 4 project sites. ✓ Regular communications with local persons and community agencies interested in providing services to families at risk. ✓ Request technical assistance from State Project Team and staff as needed.	✓ effective program functioning through local problem-solving and technical assistance from state team. ✓ follow universal assessment process established for all PSF sites. ✓ good *collaboration* and *coordination* of services offered by community agencies dealing with families at risk. ✓ regular staff and team meetings to coordinate services to families.	✓ annual on-site program evaluation by the local oversight committee. ✓ survey of persons and agencies providing services to families at risk to determine effectiveness of collaboration efforts ✓ baseline and program data regarding needs and effectiveness of services to families at risk. ✓ minutes of staff and oversight committee meetings to document problems encountered, problem resolutions, and program successes. ✓ PSF Referral Form ✓ PSF Demographic Intake Form
2. Enhance and expand existing services to provide a nurturing community environment for healthy family and child development.	✓ Establish working relationships with family service providers such as WIC, DPW, Public Health, medical service providers and hospitals, to encourage appropriate referrals and develop collaborative working relationships to meet the multiple needs of families at risk.	✓ appropriate referrals to the PSF Project from community agencies. ✓ creative outreach to engage high risk families in the PSF project. ✓ decreased incidence of child abuse and neglect among children age 0-3.	✓ survey of persons and agencies providing services to families at risk to identify: » gaps or changes in existing services » development of new services ✓ baseline/historical data on # and types of referrals to DFS (both substantiated & unsubstantiated). ✓ interviews with referred families who refuse services or who drop out of services prematurely.

OBJECTIVES	ACTIVITIES	EXPECTED OUTCOMES	ASSESSMENT TOOLS
	FAMILY-based Objectives/Outcomes		
3. Promote positive parenting skills and attitudes toward healthy family functioning.	✓ Home visits to provide intensive, long-term services geared toward development of positive caregiver-child interactions. ✓ Teach and model appropriate ways to reduce stress, meet basic needs for family survival, and problem-solve.	✓ enhanced parent-child bonding, emotional ties, and family communications skills. ✓ ability to meet basic needs for family survival. ✓ healthy family functioning.	✓ pre and post *Family Life Survey*: » abuse potential » family interaction style » coping strategies » empowerment » depression/unhappiness » domestic abuse potential ✓ PSF *Basic Family Needs* OR *Stress Factors Survey* ✓ *Family Assessment Form,* Section III: Family Interactions
4. Educate caregivers regarding healthy child development, appropriate expectations for their child(ren)'s behavior, and appropriate methods of discipline.	✓ Teach appropriate caregiver expectations for children. ✓ Model alternative methods of discipline. ✓ Make referrals for families where child development or behavioral problems are suspected.	✓ improved caregiver knowledge of and expectations regarding child development. ✓ use of appropriate methods of child discipline.	✓ pre and post *Family Life Survey*: » abuse potential » child development expectations » child risk factors » parenting attitudes » coping strategies ✓ *Family Assessment Form,* Section II: Caregivers
5. Make appropriate referrals to community resources and encourage families to effectively utilize these resources in order to promote family self-sufficiency.	✓ Completion of a family assessment designed to identify family needs. ✓ Linkage of the family to appropriate community services. ✓ Encourage families to effectively utilize community and social support resources. ✓ improved self-sufficiency among families involved in the PSF project.	✓ assessment of family strengths and needs. ✓ increased access to social and health services for all family members, especially infants to 3 years of age. ✓ effective utilization of appropriate community services through liaison efforts of home visitor	✓ pre and post full *Family Life Survey* to verify risk factors. ✓ PSF *Life Experiences Survey* ✓ PSF *Basic Family Needs Survey* OR *Stress Factors Survey* ✓ family case record data on: » types of services needed that are not available » use of existing community services.

OBJECTIVES	ACTIVITIES	EXPECTED OUTCOMES	ASSESSMENT TOOLS
6. Provide appropriate support services (such as child care and transportation) to remove barriers to participation in services and family development activities.	✓ Provide support services to families through the PSF Project. ✓ Make referrals and assist families to obtain support services provided by other community agencies.	✓ appropriate utilization of social and health services for all family members, especially infants to 3 years of age	✓ pre and post *Family Life Survey*: » coping strategies » empowerment ✓ family case record data on length and duration of services and financial assistance provided to families through the PSF project.
7. Support families in becoming empowered to be their own most effective problem solvers and change agents.	✓ Actively involve families in the development of a family service plan tailored to meet their needs. ✓ Through home visiting services, assist/teach families to: » recognize and develop their own strengths; » define their goals and objectives; » overcome barriers to success.	✓ improved personal empowerment ✓ improved self-esteem/ego strength ✓ self-identification of family needs, strengths, and goals ✓ stress reduction ✓ improved problem-solving skills ✓ provision of services that are family centered.	✓ pre and post *Family Life Survey*: » empowerment » self-esteem/ego strength » coping strategies ✓ family service plan developed jointly by worker and family. ✓ PSF *Service Plan Summary* ✓ PSF *Record of Family Contacts* ✓ PSF *Family Progress Report* ✓ quarterly client satisfaction survey
8. Help families develop social support systems to alleviate social isolation and promote family self-sufficiency.	✓ Facilitate formulation of informal family support systems ✓ Avoid family dependency on formal social support systems through a 3-phase intervention strategy that progressively reduces worker involvement: *1) do for; 2) do with; 3) cheer on.*	✓ development and effective use of informal family social support systems ✓ avoidance of dependence on formal social support systems	✓ pre and post *Family Life Survey*: » social support systems » coping strategies ✓ worker case notes documenting observed improvements in family functioning, improved sense of self-esteem and empowerment, effective problem-solving, etc. ✓ documentation of improvements or achievements in education, job activities, and family income.

TESTIMONY for Legislative Hearing on the
Department of Health & Human Services
Partnership to Strengthen Families Project
Dr. Mary Trankel, Partnership Evaluation Contractor

WHAT IS RIGOROUS EVALUATION?

- √ Combination of *quantitative* and *qualitative* data collection methods
  The strengths of one are frequently the weaknesses of the other
- √ Process Review and Outcome Review
- √ Multiple Methods of Data Collection
  1) formalized assessment instruments (e.g., standardized measures of outcomes)
  2) structured staff assessments (behavioral observation rating forms)
  3) careful administrative record reviews (for *process review* and *qualitative analysis* of case record information)
  4) narrative data from interviews
- √ Finding or Developing Assessment Tools that meet standards of **reliability** and **validity**
- √ Training Staff in Procedures to Assure Reliability and Validity of Assessment Data
  - ⇨ Interrater Reliability Testing
  - ⇨ Pre-Tests and Post-Tests Administered by Different Staff Persons
  - ⇨ Use of Comparison or Control Groups
  - ⇨ Conducting Appropriate Statistical Tests before making claims of change
  - ⇨ Using assessment tools that have been clearly operationalized and tested for reliability and validity of the data being gathered.
    e.g., asking a person whether they have been physically or sexually abused as a child vs. asking them specific questions regarding past experiences
- √ Measuring **program success** in a variety of ways, in order to gain a good understanding of what types of services produce what types of outcomes for what types of families; what length of time and what level of intensity must services be provided in order to produce specific outcomes, etc.

HOW WE HELPED COMMUNITIES PREPARE AN APPROPRIATE EVALUATION PLAN:

- √ Review literature on best practices (what prevention activities have been successful)
- √ What Assessment Tools have been used; what is the established reliability and validity of these tools
- √ Focus on REDUCING RISK FACTORS because we can't measure something that doesn't occur, and we know that certain combinations of risk factors are strongly correlated with probability of child abuse and neglect.
- √ Handouts (two):
  - ⇨ PSF Program Activities and Assessment Tools
  - ⇨ Assessment Tool Summary

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PARTNERSHIP TO STRENGTHEN FAMILIES PROJECT

Montana Department of Public Health & Human Services

FORMS LIST

Please do not revise any of the forms listed below without consulting the Evaluator, because it is very important for all sites to maintain consistency in the data being gathered for this project.

FORMS DEVELOPED for DHHS *Partnership to Strengthen Families* (PSF) Project						
Form #	FORM NAME	# of Scale items	PURPOSE	Required/ Optional	Color	Latest Revision
PSF-01	REFERRAL FORM	N/A	initial risk assessment made by referral agencies	required	ivory parchment	11/21/94
PSF-02	DEMOGRAPHIC INTAKE FORM	N/A	intake information recorded: 1) by the Home Visitor for families receiving intensive home visiting services; or 2) by self-report for persons attending support groups who are not receiving home visits	information required	blue	1/27/95
PSF-03	RELEASE OF INFORMATION FORM	N/A	for use with all families receiving home visiting services	required for home visits	white	1/27/95
PSF-04	INFORMED CONSENT FORM	N/A	for use only with persons attending support groups	required for support groups	white	1/27/95
PSF-05a PSF-05b	SITE EVALUATION PLAN a) Evaluation Research Design b) Assessment Tool Design	N/A	summary of important data gathering and client assessment procedures planned for each site	information required	prepared by Evaluation Contractor	12/8/94
PSF-06	FORM COMPLETION CHECKLIST	N/A	checklist of forms to be filled out for the Partnership Project	required	bright green	5/16/95
PSF-07	SERVICE PLAN SUMMARY	N/A	record of client family assessments, risks, strengths, goals, objectives and case record reviews	information required	yellow	1/27/95
PSF-08	LOG OF FAMILY CONTACTS AND SERVICES	N/A	to record type, length, and intensity of services; attendance at support groups	required	salmon	1/27/95
PSF-09	FAMILY TRACKING FORM	N/A	developed to document critical life events that negatively affect family functioning and major support services being provided to the family	optional	yellow	2/12/95
PSF-10	QUARTERLY FAMILY PROGRESS REPORT	N/A	to track family progress toward attainment of goals mutually developed by family and assigned worker (on a monthly, semi-monthly or quarterly basis)	required	buff	1/27/95
PSF-11	FAMILY SERVICE REVIEW FORM	N/A	a combination family client satisfaction survey and closure report	required for home visis	orange	4/18/95
PSF-50	DATA SOURCES for Verification of Risk Factors on PSF Referral Form	N/A	for evaluation research planning	resource document	white	11/11/94

FORMS DEVELOPED for DHHS *Partnership to Strengthen Families* (PSF) Project						
Form #	FORM NAME	# of Scale items	PURPOSE	Required/ Optional	Color	Latest Revision
PSF-20	FAMILY LIFE SURVEY subscales: abuse potential (14) child develp. expectations (11) child risk factors (15) coping strategies (9) depression/unhappiness (13) domestic abuse potential (3) empowerment (24) family interaction style (14) parenting attitudes (16) self-esteem/ego strength (16) social support systems (15)	151	in-depth risk assessment; verification of initial risk assessment data; pre-test/post-test client outcome data [required, but some subscales may be deleted in consultation w/Evaluator for special purposes such as support group evaluations]	required	light purple	11/11/94
PSF-21	LIFE EXPERIENCES SURVEY	12	caregiver's history of physical or sexual abuse during childhood	required	light green	11/21/94
PSF-22	STRESS FACTORS SURVEY	31	assessment of basic family needs and additional stress factors	optional	pink	11/21/94
PSF-23	BASIC FAMILY NEEDS SURVEY	15	basic needs assessment for sites not wanting to use the complete *Stress Factors* survey	required if not using PSF-22	pink	11/21/94
PSF-24	CONFLICT TACTICS SURVEY	17	assessment of family communications, conflict management style, and domestic violence potential	optional	goldenrod	11/11/94
PSF-30	INVENTORY OF SOCIAL SUPPORT	24	parent outcome form developed for support groups; may be used with clients receiving home visit services	optional	grey	11/11/94
PSF-31	SUPPORT FUNCTIONS SCALE	20	parent outcome form developed for support groups; may be used with clients receiving home visit services	optional	grey	11/11/94
PSF-32	INVENTORY OF SUPPORT SOURCES	14	parent outcome form developed for support groups; may be used with clients receiving home visit services	optional	grey	11/11/94
PSF-33	FAMILY ASSESSMENT FORM Sect I: Environment (17 items) Sect II: Caregivers (26 items) Sect III: Family Interactions (16) Sect IV-A: Child Development (7) Sect IV-B: Child Behaviors (37)	103	parent and child outcome forms developed by the Children's Bureau of Southern California; format revised for easier use and higher interrater reliability	optional	white/ history sections on grey	11/12/94
PSF-33a	FAMILY STRENGTHS & RISKS ASSESSMENT	11	monthly or quarterly family progress report based upon the major categories of the full FAMILY ASSESSMENT FORM (FAF)	optional	white	3/1/95
PSF-40	CHILD SOCIAL COMPETENCE SCALE	12	child outcome form developed for support groups; may be used with clients receiving home visit services	optional	grey	11/11/94
PSF-41	EYBERG CHILD BEHAVIOR INVENTORY	27	child outcome form developed for support groups; may be used with clients receiving home visit services	optional	grey	11/11/94

PARTNERSHIP TO STRENGTHEN FAMILIES PROJECT

Montana Department of Health & Human Services

FORM COMPLETION CHECKLIST

Use the following checklist to verify that all necessary forms have been completed for each family. Optional forms are shaded.

FORMS to be used for the *DHHS Partnership to Strengthen Families* (PSF) Project					
Form #	FORM NAME	PURPOSE	When Completed	Date Form Complete	Initials of Worker
PSF-01	REFERRAL FORM	initial risk assessment made by agencies referring families to PSF	when family is referred to PSF		
PSF-02	DEMOGRAPHIC INTAKE FORM	intake information recorded: 1) by the Home Visitor for families receiving intensive home visiting services; or 2) by self-report for persons attending support groups who are not receiving home visits	**1st home visit** (or when family agrees to participate in PSF)		
PSF-03	RELEASE OF INFORMATION FORM	for use with all families receiving home visiting services	same as PSF-02		
PSF-04	INFORMED CONSENT FORM	for use only with persons attending support groups	first **support group** meeting		
PSF-05a PSF-05b	SITE EVALUATION PLAN a) Evaluation Research Design b) Assessment Tool Design	summary of important data gathering and client assessment procedures planned for each site	reviewed by PSF staff after initial Evaluation trng		Supervisor:
PSF-07	SERVICE PLAN SUMMARY	record of client family assessments, risks, strengths, goals, objectives and case record reviews	**once** - as soon as support plan is completed		
PSF-08	LOG OF FAMILY CONTACTS AND SERVICES	to record type, length, and intensity of services; attendance at support groups	**ongoing** - to document each family contact	N/A (ongoing)	assigned support worker
PSF-09	FAMILY TRACKING FORM	document critical life events that negatively affect family functioning and major support services being provided to the family	ongoing - on an **OPTIONAL** basis	N/A (ongoing)	assigned support worker
PSF-10	QUARTERLY FAMILY PROGRESS REPORT	to track family progress toward attainment of goals mutually developed by family and assigned worker (on a monthly, semi-monthly or quarterly basis)	**quarterly** - after completion of initial family support plan		
PSF-11	FAMILY SERVICE REVIEW FORM	a combination family client satisfaction survey and closure report	when family terminates OR after one year		
PSF-20	FAMILY LIFE SURVEY *(pre-test AND post-test)*	in-depth risk assessment; verification of initial risk assessment data; pre-test/post-test client outcome data	ASAP after first contact; POST at one year or on termination		
PSF-21	LIFE EXPERIENCES SURVEY *(pre-test AND post-test)*	caregiver's history of physical or sexual abuse during childhood	ASAP after first contact; POST at one yr or term		

FORMS to be used for the *DHHS Partnership to Strengthen Families* (PSF) Project					
Form #	FORM NAME	PURPOSE	When Completed	Date Form Complete	Initials of Worker
PSF-22	STRESS FACTORS SURVEY *(pre-test AND post-test)*	assessment of basic family needs and additional stress factors	ASAP use this OR PSF-23; POST at one yr		
PSF-23	BASIC FAMILY NEEDS SURVEY *(pre-test AND post-test)*	basic needs assessment for sites not wanting to use the complete *Stress Factors* survey	ASAP use this OR PSF-22; POST at one yr		
PSF-24	CONFLICT TACTICS SURVEY	assessment of family communications, conflict management style, and domestic violence potential	ASAP; POST at one year or termination		
PSF-30	INVENTORY OF SOCIAL SUPPORT	parent outcome form developed for support groups; may be used with clients receiving home visit services	ASAP; POST at one year or termination		
PSF-31	SUPPORT FUNCTIONS SCALE	parent outcome form developed for support groups; may be used with clients receiving home visit services	ASAP; POST at one year or termination		
PSF-32	INVENTORY OF SUPPORT SOURCES	parent outcome form developed for support groups; may be used with clients receiving home visit services	ASAP; POST at one year or termination		
PSF-33	FAMILY ASSESSMENT FORM Section I: Environment Section II: Caregivers Section III: Family Interactions Sect IV-A: Child Development Sect IV-B: Child Behaviors	parent and child outcome forms developed by the Children's Bureau of Southern California; format revised for easier use and higher interrater reliability	within first three home visits or ASAP; POST at one year or termination		
PSF-33a	FAMILY STRENGTHS & RISKS ASSESSMENT	monthly or quarterly family progress report based upon the major categories of the full FAMILY ASSESSMENT FORM (FAF)	quarterly after initial FAF completed		
PSF-40	CHILD SOCIAL COMPETENCE SCALE	child outcome form developed for support groups; may be used with clients receiving home visit services	ASAP; POST at one year or termination		
PSF-41	EYBERG CHILD BEHAVIOR INVENTORY	child outcome form developed for support groups; may be used with clients receiving home visit services	ASAP; POST at one year or termination		

Report Binder

Stock No./Color

80571	Black
80572	Lt. Blue
80573	Dk. Blue
80578	Rust
80579	Exec. Red

MADE IN THE USA

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